TY NAME: BASF Corp.				
TY ID (PREMISE NUMBER):	02-47-04-0195			
TY ADDRESS: 120 Pine Stre	eet, Elyria, OH 44035			
e or most recent modification	n date: 07/27/01			
ERLY Reporting Period		SEMIANNUAL Reporting P fields if this report does inc	••	N/A@ below in the AFrom@ and on reporting)
NA	To: NA	From: 01/01/13	To: 06/30/1	3
ages in <u>report,</u> including this	ages in <u>report,</u> including this one: 60 pages			
ist any supporting attachments				
ng deadline: 07/31/2013				

NOTE: The deviation reporting period shall be stated in the following format: Axx/xx/xx through zz/zz/zz@ where xx/xx/xx and zz/zz/zz are the beginning and end dates for the deviation reporting period respectively.

#### SIGNATURE FOR STATEMENT

This statement shall be signed by the responsible official as defined in OAC rule 3745-77-01(GG). Making of any false material statement, representation or certification constitutes

a violation of ORC 3704.05(H), and subjects the responsible party signing this statement to civil and/or criminal penalties as provided in ORC 3704.06(C) and ORC 3704.

#### **CERTIFICATION**

Based on information and belief formed after reasonable inquiry, I hereby affirm, as stated in OAC rule 3745-77-03(D), that the statements and information as transmitted in this

Title V report are true, accurate and complete to the best of my knowledge.

Authorized Signature	Date		
Name (Please Print)	Title		
Ohio Environmental Protection Agency Section I- Page 2 Deviation Reporting			
ACILITY NAME: BASF Corp.			
ACILITY ID (PREMISE NUMBER): 02-47-04-0195			
ACILITY ADDRESS: 120 Pine Street, Elyria, OH 44035			
ssuance or most recent modification date: 07/27/01			
QUARTERLY Reporting Period	<b>SEMIANNUAL</b> Reporting Period (please indicate "N/A" below in the "From" and "To" fields if the report does include semiannual deviation reporting)		
rom: NA To: NA	From: 01/01/13	To: 06/30/13	
Reporting deadline: 07/31/2013			

Ohio Environmental Protection Agency **Deviation Reporting** 

FACILITY NAME			
FACILITY ID (PREMISE NUME	BER)		
FACILITY ADDRESS			
Issuance or most recent modifi	ication date		
QUARTERLY Reporting Period		SEMIANNUAL Reporting Period (please in this report does include semiannual deviated)	
From: To:		From:	То:
Reporting deadline			

#### SECTION I -

#### $\overline{704.05}$ (H), PART I General Terms and Conditions (Permit Requirement Reporting) (Table1) Mark the following box with an >X= if no General Terms and Conditions deviations occurred

#### THERE WERE NO DEVIATIONS OF ANY OF THE TERMS AND CONDITIONS OF PART I OF THE TITLE V PERMIT DURING THE REPORTING PERIOD

Add rows as necessary to the following table for reported deviations (one for each General Term as applicable; see detailed instructions for more information) (Table2)

PERMIT RM scription	Reporting Requirement (choose one)		ACTUAL METHOD USED TO DETERMINE COMPLIANCE		DEVIATION INFORMATIC	PROBABLE CAUSE FOR THE DEVIATION	CORRECTIVE ACTIO PREVENTATIVE MEASURE	
	Quarterly	Semi- Annual		DEVIATION DURATION		DESCRIPTION AND MAGNITUDE OF THE DEVIATION		
				DATE / TIME START	DATE / TIME END			

TVDEVIATIONV1.DOC 11/2005

Ohio Environmental Protection Agency Deviation Reporting

FACILITY NAME			
FACILITY ID (PREMISE NUME	BER)		
FACILITY ADDRESS			
Issuance or most recent modifi	cation date		
QUARTERLY Reporting Period		<b>SEMIANNUAL</b> Reporting Period (please in this report does include semiannual deviated)	
From: To:		From:	То:
Reporting deadline			

PERMIT RM scription	Reporting Requirement				DEVIATION INFORMATIO	PROBABLE CAUSE FOR THE DEVIATION	CORRECTIVE ACTIO	
·			arterly Semi-	DEVIATION DURATION		DESCRIPTION AND MAGNITUDE OF THE DEVIATION		
				DATE / TIME START	DATE / TIME END			

Ohio Environmental Protection Agency Section II- Page 1

FACILITY NAME: BASF Corp.			
FACILITY ID (PREMISE NUMBER):	02-47-04-0195		
FACILITY ADDRESS: 120 Pine Stre	et, Elyria, OH 44035		
Issuance or most recent modification	date: 07/27/01		
QUARTERLY Reporting Period		<b>SEMIANNUAL</b> Reporting Period (please in fields if this report does include semiannual	
From: NA	To: NA	From: 01/01/13	To: 06/30/13
TIOIII. NA	TO. NA	1 10111. 0 1/0 1/ 13	10. 00/30/13

#### <u>Section II - Part II Facility-wide Permit Requirement Reporting</u> Insignificant Emissions Unit Negative Declarations (Table1)

List each insignificant emissions unit where no deviations of any PTI terms or applicable requirements for the listed emissions unit occurred, or add rows as necessary to the deviation reporting table (see next page) for reported deviations (one for each term as applicable; see detailed instructions for more information)

VERE NO DEVIATIONS OF <u>ANY</u> PTI TERMS OR APPLICABLE REQUIREMENTS FOR THE FOLLOWING LISTED INSIGNIFICANT EMISSIONS UNITS IDENTIFIED IN PART II. I LE V PERMIT:

color tray dying (E-5)

trays dryers, littleford mixer (E-31)

HC-11 tanks (E-53)

TCP blend & slugger (E-61)

ceramic color dryer #9 (E-83)

waste shredder (E-80)

FACILITY NAME: BASF C	orp.		
FACILITY ID (PREMISE N	UMBER): 02-47-04-0195		
FACILITY ADDRESS: 120	Pine Street, Elyria, OH 44035		
Issuance or most recent me	odification date: 07/27/01		
QUARTERLY Reporting Period			iod (please indicate AN/A@ below in the AFr de semiannual deviation reporting)
From: NA To: NA		From: 01/01/13	To: 06/30/13
Reporting deadline: 07/31/	2013		·

VERE NO DEVIATIONS OF ANY PTI TERMS OR APPLICABLE REQUIREMENTS FOR THE FOLLOWING LISTED INSIGNIFICANT EMISSIONS UNITS IDENTIFIED IN PART II./
LE V PERMIT:

general catalyst dryers #4, #5 (E-86)

nitric acid dilution (E-87)

ZR sinter furnace (E-89)

ammonia stripper in WWTP (E-93)

12 inch rotary calciner (E-95)

fast fire kiln (E-90)

reduction towers (E-98)

elevator kilns (E-96)

#6 rotary calciner (E-97)

FACILITY NAME: BASF Corp	ρ.		
FACILITY ID (PREMISE NUM	MBER): 02-47-04-0195		
FACILITY ADDRESS: 120 Pi	ine Street, Elyria, OH 44035		
Issuance or most recent modi	fication date: 07/27/01		
QUARTERLY Reporting Perio	QUARTERLY Reporting Period		riod (please indicate AN/A@ below in the AFr de semiannual deviation reporting)
From: NA To: NA		From: 01/01/13	To: 06/30/13
Reporting deadline: 07/31/20	13		

VERE NO DEVIATIONS OF ANY PTI TERMS OR APPLICABLE REQUIREMENTS FOR THE FOLLOWING LISTED INSIGNIFICANT EMISSIONS UNITS IDENTIFIED IN PART II./
LE V PERMIT:

Black furnaces (E-99)

Horne tableting machines (E-102)

sulfuric acid storage tank

Kewanee boiler, rated at 8.6 MMBtu/hr

Ohio Environmental Protection Agency Section II- Page 2

**Deviation Reporting** 

FACILITY NAME: BASF Corp	).		
FACILITY ID (PREMISE NUM	BER): 02-47-04-0195		
FACILITY ADDRESS: 120 Pi	ne Street, Elyria, OH 44035		
Issuance or most recent modif	fication date: 07/27/01		
QUARTERLY Reporting Period			riod (please indicate AN/A@ below in the AFr de semiannual deviation reporting)
From: NA To: NA		From: 07/01/12	To: 12/31/13
Reporting deadline: 07/31/201	13		

#### <u>Facility-wide Permit Requirements Terms and Conditions (Permit Requirement Reporting) - Negative Declarations (mark with an >X= if applicable)</u> (Table 2)

THERE WERE NO DEVIATIONS OF ANY OF THE TERMS AND CONDITIONS OF PART II OF THE TITLE V PERMIT DURING THE REPORTING PERIOD SPECIFIED IN THIS REPORT

#### Section II - Part II Facility-wide and/or IEU permit requirement (Permit Requirement Reporting) - Deviation Reporting (Table 3)

Add rows as necessary to the following table for reported deviations (one for each Term as applicable; see detailed instructions for more information)

r IEU T iption	Reporting Requirement (choose one) or both ACTUAL METHOD USED TO INFORMATION INFORMATION (COMPLIANCE		PROBABLE CAUSE FOR THE DEVIATION	CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A	MALFUNCTION VERBAL REPORT(S) DATE(S)	MALFUN WRIT REPOF DATE			
is for	Quarterly	Semi- Annual	 	DURATION MAGNI	DESCRIPTION AND MAGNITUDE OF THE			MALFUNCTION ? (Yes or No - If Yes, continue to the next column)		(If no reports state ANO R in the spac
			DATE / TIME START	DATE / TIME END	DEVIATION			the next column)		
				· · · · · · · · · · · · · · · · · · ·	I	· · · · · · · · · · · · · · · · · · ·			I	

FACILITY NAME: BASF Corp.		
FACILITY ID (PREMISE NUME	BER): 02-47-04-0195	
FACILITY ADDRESS: 120 Pin	e Street, Elyria, OH 44035	
Issuance or most recent modifi	cation date: 07/27/01	
QUARTERLY Reporting Period	d	 iod (please indicate AN/A@ below in the AFr de semiannual deviation reporting)
QUARTERLY Reporting Period From: NA	To: NA	 ,,

r IEU T iption is for	Reporting Requirement (choose one) or both ACTUAL METHOD USED TO DETERMINE COMPLIANCE			DEVIATION INFORMATION			CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A MALFUNCTION	MALFUNCTION VERBAL REPORT(S) DATE(S)	MALFUN WRIT REPOF DATE (If no reports	
	Quarterly	Semi- Annual			EVIATION DESCRIPTION AND MAGNITUDE OF THE				? (Yes or No - If Yes, continue to the next column)	(If no reports were made, state ANO REPORTS@ in the space below)	state ANO R in the space
				DATE / TIME START	DATE / TIME END	DEVIATION			the next column)		

Ohio Environmental Protection Agency Section III- Page 1

**Deviation Reporting** 

FACILITY NAME: BASF Corp.			
FACILITY ID (PREMISE NUMBER)	: 02-47-04-0195		
FACILITY ADDRESS: 120 Pine St	reet, Elyria, OH 44035		
Issuance or most recent modification	on date: 07/27/01		
QUARTERLY Reporting Period	· •		od (please indicate AN/A@ below in the AFroese semiannual deviation reporting)
From: NA	To: NA	From: 01/01/13	To: 06/30/13
Reporting deadline: 07/31/2013			

#### Section III - Part III Emissions Unit Terms and Conditions (Permit Requirement Reporting) - Negative Declarations (Table 1)

List each emissions unit where no deviations of any terms for the listed emissions unit occurred, or add rows as necessary to the second table (see next page) for reported deviations (one for each term as applicable; see detailed instructions for more information)

#### VERE NO DEVIATIONS OF ANY OF THE TERMS AND CONDITIONS OF PART III OF THE TITLE V PERMIT FOR THE FOLLOWING LISTED EMISSIONS UNITS:

Emissions Unit ID	Please place an >X= below if there were no Quarterly Deviations - If an >X= is not indicated, the deviation(s) must be identified in Table2 below	If applicable, please place an >X= below if there no Semiannual Deviations - If an >X= is not inditine the deviation(s) must be identified in Table2 b
2 BOILER (E-91))		X
ER COLOR BLENDING (E-6))		X
ER COLOR MILLING (E-7))		X
U/BI CALCINERS (E-26))		X

orp.		
•		
Pine Street, Elyria, OH 44035		
odification date: 07/27/01		
QUARTERLY Reporting Period		od (please indicate AN/A@ below in the AFroe semiannual deviation reporting)
To: NA	From: 01/01/13	To: 06/30/13
2013		
		DMBER): 02-47-04-0195  Pine Street, Elyria, OH 44035  Didification date: 07/27/01  Period  SEMIANNUAL Reporting Period fields if this report does include From: 01/01/13

EN CAT MIXERS (E-29))	X
ER COLOR BLEND AND MILL (E-34))	X
ICKEL TABLET SYSTEM (E-57))	X
RON ROOM TABLET)	X
ER COLOR PULVERIZER (E-62))	X
OLOR JETMILL (E-94))	X
OLV DRY AND VERT CALC (E-75))	X
&S DRIER IN HC-11)	X
HUTTLE KILN #1 (E-88))	X

ne Street, Elyria, OH 44035					
ication date: 07/27/01					
QUARTERLY Reporting Period		<b>SEMIANNUAL</b> Reporting Period (please indicate AN/A@ below in the AF fields if this report does include semiannual deviation reporting)			
To: NA	From: 01/01/13	To: 06/30/13			
3		·			
	To: NA	BER): 02-47-04-0195  ne Street, Elyria, OH 44035  ication date: 07/27/01  SEMIANNUAL Reporting Periofields if this report does include  To: NA  From: 01/01/13			

2 SHUTTLE KILN (E-92))	X
OPPER CALCINER #2)	X
LDG 24 WEST TABLETTING)	X
LDG 25 EAST TABLETTING)	X
UNNEL KILN #3)	X
RON CATALYST MIXING (E-104))	X
RAVITY BED SEPERATOR)	X
ATIONAL DRYER)	X

Ohio Environmental Protection Agency Section III- Page 2

**Deviation Reporting** 

FACILITY NAME: BASF Corp.			
FACILITY ID (PREMISE NUMBER): 02	2-47-04-0195		
FACILITY ADDRESS: 120 Pine Street	i, Elyria, OH 44035		
Issuance or most recent modification d	ate: 07/27/01		
QUARTERLY Reporting Period		SEMIANNUAL Reporting Period	b
From: NA	To: NA	From: 01/01/13	To: 06/30/13
Reporting deadline: 07/31/2013			

#### Section III - Part III Emissions Unit Terms and Conditions (Permit Requirement Reporting) - Deviation Reporting (Table2)

Add rows as necessary to the following table for reported deviations (one for each Term as applicable; see detailed instructions for more information) - Please group deviations for each emissions unit that has deviations of multiple terms

i	ınτormaτιοn) - Piease gi	₁roup aev	lations to	7 each emissior	is unit that	nas aevia	tions of multi	pie terms.				,
NS J) otion w)	TITLE V PERMIT TERM NO & Description	Reporting Requirement (choose one) or both		ACTUAL METHOD USED TO DETERMINE COMPLIANCE	DEVIATION INFORMATION		PROBABLE CAUSE FOR THE DEVIATION	CAUSE FOR ACTIONS / THE PREVENTATIVE	WAS THIS DEVIATION ATTRIBUTABLE TO A	VERBAL REPORT(S) DATE(S)	MALI W RE. D	
		Quarterly	Semi- Annual		DEVIA DURA		DESCRIPTION AND	1		(Yes or No - If Yes, continue to	(If no reports were made, state ANO REPORTS@ in the	we sta
					DATE/TIME START	DATE/TIM E END	MAGNITUDE OF THE DEVIATION			the next column)	space below)	REP the s

FACILITY NAME: BASE Corp.			
FACILITY ID (PREMISE NUME	3ER): 02-47-04-0195		
FACILITY ADDRESS: 120 Pir	ne Street, Elyria, OH 44035		
Issuance or most recent modifi	cation date: 07/27/01		
QUARTERLY Reporting Perio	d	SEMIANNUAL Reporting Perio	od
From: NA	To: NA	From: 01/01/13	To: 06/30/13
Reporting deadline: 07/31/2013			

NS J) otion w)	TITLE V PERMIT TERM NO & Description	TERM Reporting Requirement		ACTUAL METHOD DEVIATION USED TO INFORMATION DETERMINE COMPLIANCE			PROBABLE CAUSE FOR THE DEVIATION	CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A	VERBAL REPORT(S) DATE(S)	MALI W RE. D					
		Quarterly	Semi- Annual		DEVIA DURA		DESCRIPTION AND			MALFUNCTION? (If no reports made, state and made, state and made) (If no reports made) (If no		(Yes or No - If made, state Yes, continue to REPORTS		(Yes or No - If made, state Yes, continue to REPORTS@		(If r we sta REF
					DATE/TIME START	DATE/TIM E END	MAGNITUDE OF THE DEVIATION			the next column)	space below)	the s				
<b>∕</b> it	General Terms and Conditions B. I		×	Records Review	01/01/13	06/30/13	Operated 18 Sources without a PTI	Facility personnel change over and inadequate Title V training	A Title V compliance plan and training program are currently being implemented across all process operations.	No	No					

FACILITY NAME: BASF Corp.			
FACILITY ID (PREMISE NUMBER): 02	2-47-04-0195		
FACILITY ADDRESS: 120 Pine Street	, Elyria, OH 44035		
Issuance or most recent modification d	ate: 07/27/01		
QUARTERLY Reporting Period		SEMIANNUAL Reporting Period	
From: NA	To: NA	From: 01/01/13	To: 06/30/13
Reporting deadline: 07/31/2013			

NS J) otion w)	TITLE V PERMIT TERM NO & Description	(choos	Requirement se one) ooth	ACTUAL METHOD USED TO DETERMINE COMPLIANCE		DEVIATION INFORMATIO		PROBABLE CAUSE FOR THE DEVIATION	CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A	MALFUNCTION VERBAL REPORT(S) DATE(S)	MALI W RE. D
		Quarterly	Semi- Annual		DEVIA DURA		DESCRIPTION AND MAGNITUDE			MALFUNCTION? (Yes or No - If Yes, continue to the next column)	(If no reports were made, state ANO REPORTS@ in the	(If r we sta REF
					DATE/TIME START	DATE/TIM E END	OF THE DEVIATION			the next column)	space below)	the s
; Kiln	A.III.1- Perform weekly checks, when the emissions unit is in operation and when the weather conditions allow, for any visible particulate emissions from the stack serving this emissions unit.		×	Records of weekly VE checks	01/01/13	01/27/13	A total of 4 weekly VE checks were not performed.	Facility personnel change over and inadequate Title V training processes.	A Title V compliance plan and training program are currently being implemented across all process operations.	No	No	

. 9			
FACILITY NAME: BASF Corp.			
FACILITY ID (PREMISE NUMBER): 02	2-47-04-0195		
FACILITY ADDRESS: 120 Pine Street	, Elyria, OH 44035		
Issuance or most recent modification da	ate: 07/27/01		
QUARTERLY Reporting Period		SEMIANNUAL Reporting Perio	od
From: NA	To: NA	From: 01/01/13	To: 06/30/13
Reporting deadline: 07/31/2013			

NS J) otion w)	TITLE V PERMIT TERM NO & Description	(choos	Requirement se one) ooth	ACTUAL METHOD USED TO DETERMINE COMPLIANCE		DEVIATION INFORMATIO			CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A MALEUNICTION 2	DEVIATION VEF E ATTRIBUTABLE REPO EN TO A DAT	DEVIATION VERBAL ATTRIBUTABLE REPORT(S) TO A DATE(S)		MALI W RE D
		Quarterly	Semi- Annual		DEVIA DURA	ATION ATION	DESCRIPTION AND MAGNITUDE			(Yes or No - If Yes, continue to the next column)	made, state ANO REPORTS@ in the space below)	(If r we sta REP		
					DATE/TIME START	DATE/TIM E END	OF THE DEVIATION			the next column	space below)	the s		
ER ER	A.III.2- Record the pressure drop across the baghouse on daily basis.		x	Records of daily pressure drop readings	01/05/13	01/05/13	A total of 2 daily ΔP records are missing.	Facility personnel change over and inadequate Title V training processes.	A Title V compliance plan and training program are currently being implemented across all process operations.	No	No			

FACILITY NAME: BASF Corp.			
FACILITY ID (PREMISE NUMBE	R): 02-47-04-0195		
FACILITY ADDRESS: 120 Pine	Street, Elyria, OH 44035		
Issuance or most recent modifica	ation date: 07/27/01		
QUARTERLY Reporting Period		SEMIANNUAL Reporting Perio	od
From: NA	To: NA	From: 01/01/13	To: 06/30/13
Reporting deadline: 07/31/2013			

NS J) otion w)	TITLE V PERMIT TERM NO & Description	(choos	Requirement se one) poth	ACTUAL METHOD USED TO DETERMINE COMPLIANCE		DEVIATION INFORMATIO		PROBABLE CAUSE FOR THE DEVIATION	CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A	MALFUNCTION VERBAL REPORT(S) DATE(S)	MALI W RE. D
		Quarterly	Semi- Annual			ATION ATION	DESCRIPTION AND			MALFUNCTION? (Yes or No - If Yes, continue to the next column)	(If no reports were made, state ANO REPORTS@ in the	(If r we sta REF
					DATE/TIME START	DATE/TIM E END	MAGNITUDE OF THE DEVIATION			the next column	space below)	the sp
) RY ER	B.III.1.a-Collect and record the pressure drop across each stage of the scrubber, in inches of water, on a once per shift basis.		×	Records of daily pressure drop readings	01/15/13	01/16/13	A total of 6 daily ΔP records are missing.	Facility personnel change over and inadequate Title V training processes.	A Title V compliance plan and training program are currently being implemented across all process operations	No	No	

FACILITY NAME: BASF Corp.			
FACILITY ID (PREMISE NUMBER): 02	2-47-04-0195		
FACILITY ADDRESS: 120 Pine Street	, Elyria, OH 44035		
Issuance or most recent modification d	ate: 07/27/01		
QUARTERLY Reporting Period		SEMIANNUAL Reporting Period	
From: NA	To: NA	From: 01/01/13	To: 06/30/13
Reporting deadline: 07/31/2013			

NS J) otion w)	TITLE V PERMIT TERM NO & Description	(choos	Requirement se one) poth	ACTUAL METHOD USED TO DETERMINE COMPLIANCE		DEVIATION INFORMATIO		PROBABLE CAUSE FOR THE DEVIATION	CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A	MALFUNCTION VERBAL REPORT(S) DATE(S)	MALI W RE. D
		Quarterly	Semi- Annual			ATION ATION	DESCRIPTION AND			MALFUNCTION? (Yes or No - If Yes, continue to the next column)	(If no reports were made, state ANO REPORTS@ in the	(If r we sta REF
					DATE/TIME START	DATE/TIM E END	MAGNITUDE OF THE DEVIATION			the next column	space below)	the sp
) RY ER	B.III.1.a-Collect and record the pressure drop across each stage of the scrubber, in inches of water, on a once per shift basis.		×	Records of daily pressure drop readings	04/12/13	04/14/13	A total of 6 daily ΔP records are missing.	Facility personnel change over and inadequate Title V training processes.	A Title V compliance plan and training program are currently being implemented across all process operations	No	No	

FACILITY NAME: BASF Corp.			
FACILITY ID (PREMISE NUMBER): 02	2-47-04-0195		
FACILITY ADDRESS: 120 Pine Street	, Elyria, OH 44035		
Issuance or most recent modification d	ate: 07/27/01		
QUARTERLY Reporting Period		SEMIANNUAL Reporting Period	
From: NA	To: NA	From: 01/01/13	To: 06/30/13
Reporting deadline: 07/31/2013			

NS J) otion W)	TITLE V PERMIT TERM NO & Description	(choos	Requirement se one) ooth	ACTUAL METHOD USED TO DETERMINE COMPLIANCE		DEVIATION INFORMATIO		PROBABLE CAUSE FOR THE DEVIATION	CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A MALFUNCTION?	MALFUNCTION VERBAL REPORT(S) DATE(S)	MALI W RE. D (If r
		Quarterly	Semi- Annual			ATION ATION	DESCRIPTION AND MAGNITUDE			(Yes or No - If Yes, continue to the next column)	(If no reports were made, state ANO REPORTS@ in the space below)	we sta REF
					DATE/TIME START	DATE/TIM E END	OF THE DEVIATION			une ment defiantily	opade below)	the s
) RY ER	B.III.1.a-Collect and record the pressure drop across each stage of the scrubber, in inches of water, on a once per shift basis.		x	Records of pressure drop readings for Stage 1	01/14/13	01/15/13	A total of 6 once per shift ΔP records are missing for the 1st scrubber stage.	Failure in data acquisition software/ intermittent collection of backup data	Troubleshooting data transfer issue and implementing improved data collection procedures	No	No	

FACILITY NAME: BASF Corp.			
FACILITY ID (PREMISE NUMBER):	02-47-04-0195		
FACILITY ADDRESS: 120 Pine Stre	et, Elyria, OH 44035		
Issuance or most recent modification	date: 07/27/01		
QUARTERLY Reporting Period		SEMIANNUAL Reporting Perio	od
From: NA	To: NA	From: 01/01/13	To: 06/30/13
Reporting deadline: 07/31/2013			

NS otion W)	TITLE V PERMIT TERM NO & Description	(choos	Requirement se one) both Semi- Annual	ACTUAL METHOD USED TO DETERMINE COMPLIANCE	DURA DATE/TIME			PROBABLE CAUSE FOR THE DEVIATION	CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A MALFUNCTION? (Yes or No - If Yes, continue to the next column)	MALFUNCTION VERBAL REPORT(S) DATE(S) (If no reports were made, state ANO REPORTS@ in the space below)	MALI W RE. D (If r we sta REF the sa
PY ER	B.III.1.a-Collect and record the pressure drop across each stage of the scrubber, in inches of water, on a once per shift basis.		×	Records of pressure drop readings for Stage 1	04/12/13	04/14/13	A total of 6 once per shift ΔP records are missing for the 1st scrubber stage.	Failure in data acquisition software/ intermittent collection of backup data	Troubleshooting data transfer issue and implementing improved data collection procedures	No	No	

FACILITY NAME: BASF Corp.			
FACILITY ID (PREMISE NUMBER): 02	2-47-04-0195		
FACILITY ADDRESS: 120 Pine Street	, Elyria, OH 44035		
Issuance or most recent modification d	ate: 07/27/01		
QUARTERLY Reporting Period		SEMIANNUAL Reporting Period	
From: NA	To: NA	From: 01/01/13	To: 06/30/13
Reporting deadline: 07/31/2013			

NS J) otion w)	TITLE V PERMIT TERM NO & Description	(choos	Requirement se one) ooth	ACTUAL METHOD USED TO DETERMINE COMPLIANCE	DEVIATION INFORMATION			PROBABLE CAUSE FOR THE DEVIATION	CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A	MALFUNCTION VERBAL REPORT(S) DATE(S)	MALI W RE. D
		Quarterly	Semi- Annual		DEVIA DURA	ATION ATION	DESCRIPTION AND MAGNITUDE			MALFUNCTION? (Yes or No - If Yes, continue to the next column)	(If no reports were made, state ANO REPORTS@ in the	(If r we sta REF
					DATE/TIME START	DATE/TIM E END	OF THE DEVIATION			the next column	space below)	the s
I RY ER	A.III.2- Perform weekly checks, when the emissions unit is in operation and when the weather conditions allow, for any visible particulate emissions from the stack serving this emissions unit.		×	Records of weekly VE checks	01/01/13	01/27/13	A total of 4 weekly VE checks were not performed during the reporting period.	Facility personnel change over and inadequate Title V training processes.	A Title V compliance plan and training program are currently being implemented across all process operations.	No	No	

FACILITY NAME: BASF Corp.			
FACILITY ID (PREMISE NUMBER): 02	2-47-04-0195		
FACILITY ADDRESS: 120 Pine Street	, Elyria, OH 44035		
Issuance or most recent modification d	ate: 07/27/01		
QUARTERLY Reporting Period		SEMIANNUAL Reporting Period	
From: NA	To: NA	From: 01/01/13	To: 06/30/13
Reporting deadline: 07/31/2013			

NS J) otion W)	TITLE V PERMIT TERM NO & Description	(choos	Requirement se one) poth	ACTUAL METHOD USED TO DETERMINE COMPLIANCE	DEVIATION INFORMATION			PROBABLE CAUSE FOR THE DEVIATION	CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A MALFUNCTION?	MALFUNCTION VERBAL REPORT(S) DATE(S)	MALI W RE. D
		Quarterly	Semi- Annual			ATION ATION	DESCRIPTION AND MAGNITUDE			(Yes or No - If Yes, continue to the next column)	(If no reports were made, state ANO REPORTS@ in the space below)	(If r we sta REF
					DATE/TIME START	DATE/TIM E END	OF THE DEVIATION			une next columny	space below)	the s
) RY ER	B.III.1.a-Collect and record the pressure drop across each stage of the scrubber, in inches of water, on a once per shift basis.		×	Records of pressure drop readings for Stages 1, 2, 3	03/29/12	03/29/13	A total of 3 once per shift ΔP records are missing for the three scrubber stages.	Failure in data acquisition software/ intermittent collection of backup data.	Troubleshooting data transfer issue and implementing improved data collection procedures.	No	No	

FACILITY NAME: BASE Corp.			
FACILITY ID (PREMISE NUME	3ER): 02-47-04-0195		
FACILITY ADDRESS: 120 Pir	ne Street, Elyria, OH 44035		
Issuance or most recent modifi	cation date: 07/27/01		
QUARTERLY Reporting Perio	d	SEMIANNUAL Reporting Perio	od
From: NA	To: NA	From: 01/01/13	To: 06/30/13
Reporting deadline: 07/31/201	3		

NS J) otion w)	TITLE V PERMIT TERM NO & Description	M Reporting Requirement USED TO			DEVIATION INFORMATION			CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A	MALFUNCTION VERBAL REPORT(S) DATE(S)	MALI W RE. D	
		Quarterly	Semi- Annual			ATION ATION	DESCRIPTION AND MAGNITUDE			MALFUNCTION? (Yes or No - If Yes, continue to the next column)	(If no reports were made, state ANO REPORTS@ in the space below)	(If r we sta REF
					DATE/TIME START	DATE/TIM E END	OF THE DEVIATION			the next column	space below)	the s
) RY ER	B.III.1.a-Collect and record the pressure drop across each stage of the scrubber, in inches of water, on a once per shift basis.		x	Records of pressure drop readings for Stages 1, 2, 3	04/12/13	04/14/13	A total of 6 once per shift ΔP records are missing for the three scrubber stages.	Failure in data acquisition	Troubleshooting data transfer issue	No	No	

FACILITY NAME: BASF Corp.			
FACILITY ID (PREMISE NUMB	ER): 02-47-04-0195		
FACILITY ADDRESS: 120 Pine	e Street, Elyria, OH 44035		
Issuance or most recent modific	cation date: 07/27/01		
QUARTERLY Reporting Period		SEMIANNUAL Reporting Perio	od
From: NA	To: NA	From: 01/01/13	To: 06/30/13
Reporting deadline: 07/31/2013			

NS J) otion w)	TITLE V PERMIT TERM NO & Description	(choos	Requirement se one) poth	ACTUAL METHOD USED TO DETERMINE COMPLIANCE	DEVIATION INFORMATION			PROBABLE CORRECTIVE WAS THIS CAUSE FOR ACTIONS / DEVIATION THE PREVENTATIVE ATTRIBUTABLE DEVIATION MEASURES TAKEN TO A MALEUNICTION 2	DEVIATION ATTRIBUTABLE	MALFUNCTION VERBAL REPORT(S) DATE(S) (If no reports were	MALI W RE. D (If r	
		Quarterly	Semi- Annual		DEVIA DURA	ATION ATION	DESCRIPTION AND MAGNITUDE			(Yes or No - If Yes, continue to the next column)	made, state ANO REPORTS@ in the space below)	we sta REP
					DATE/TIME START	DATE/TIM E END	OF THE DEVIATION			une next columny	space below)	the s
) RY ER	B.III.1.b- Collect and record the scrubber water flow rate to each stage of the scrubber, in gallons per minute, on a once per shift basis.		×	Records of scrubber water flow rate for each stage	03/29/13	03/29/12	A total of 3 once/shift scrubber water flow rate records are missing (3 for each stage).	Failure in data acquisition	Troubleshooting data transfer issue	No	No	

FACILITY NAME: BASF Corp.			
FACILITY ID (PREMISE NUMBER): 0	2-47-04-0195		
FACILITY ADDRESS: 120 Pine Street	;, Elyria, OH 44035		
Issuance or most recent modification d	ate: 07/27/01		
QUARTERLY Reporting Period		SEMIANNUAL Reporting Period	
From: NA	To: NA	From: 01/01/13	To: 06/30/13
Reporting deadline: 07/31/2013			

NS J) otion w)	TITLE V PERMIT TERM NO & Description	(choos	Requirement se one) both	ACTUAL METHOD USED TO DETERMINE COMPLIANCE	DEVIATION INFORMATION				ACTIONS / DEVIATION PREVENTATIVE ATTRIBUTABLE I MEASURES TAKEN TO A	DEVIATION ATTRIBUTABLE TO A	DEVIATION VERBAL ATTRIBUTABLE REPORT(S)	MALI W RE. D (If r
		Quarterly	Semi- Annual		DEVIA DURA		DESCRIPTION AND MAGNITUDE			(Yes or No - If Yes, continue to the next column)	made, state ANO REPORTS@ in the space below)	we sta REF
					DATE/TIME START	DATE/TIM E END	OF THE DEVIATION			the next columny	Space Below)	the s
) RY ER	B.III.2.b- Record the pH of the scrubber liquor on a once per shift basis.		×	Records of scrubber liquor pH for each stage	04/12/13	04/14/13	A total of 6 once/shift scrubber liquor pH records are missing (3 for each stage).	Failure in data acquisition	Restored.	No	No	

FACILITY NAME: BASE Corp.			
FACILITY ID (PREMISE NUME	3ER): 02-47-04-0195		
FACILITY ADDRESS: 120 Pir	ne Street, Elyria, OH 44035		
Issuance or most recent modifi	cation date: 07/27/01		
QUARTERLY Reporting Perio	d	SEMIANNUAL Reporting Perio	od
From: NA	To: NA	From: 01/01/13	To: 06/30/13
Reporting deadline: 07/31/201	3		

NS J) otion w)	TITLE V PERMIT TERM NO & Description	Reporting Requirement (choose one) or both		ACTUAL METHOD USED TO DETERMINE COMPLIANCE	DEVIATION INFORMATION			PROBABLE CAUSE FOR THE DEVIATION	CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS MALFUNCTION DEVIATION VERBAL ATTRIBUTABLE REPORT(S) TO A DATE(S)		W RE Dere (If r IO we the sta
		Quarterly	Semi- Annual			ATION ATION	DESCRIPTION AND			MALFUNCTION? (Yes or No - If Yes, continue to the next column)	(If no reports were made, state ANO REPORTS@ in the	we sta
					DATE/TIME START	DATE/TIM E END	MAGNITUDE OF THE DEVIATION			the next column	space below)	the s
: !R/ !A !)	A.III.1-Record the pressure drop across the baghouse on a daily basis.		×	Records of daily pressure drop readings	01/03/13	01/03/13	A total of 1 daily ΔP records are missing.	Daily ΔP records were not recorded.	A Title V compliance plan and training program are currently being implemented across all process operations	No	No	

FACILITY NAME: BASF Corp.			
FACILITY ID (PREMISE NUMBE	R): 02-47-04-0195		
FACILITY ADDRESS: 120 Pine	Street, Elyria, OH 44035		
Issuance or most recent modifica	ation date: 07/27/01		
QUARTERLY Reporting Period		SEMIANNUAL Reporting Perio	od
From: NA	To: NA	From: 01/01/13	To: 06/30/13
Reporting deadline: 07/31/2013			

NS J) otion w)	TITLE V PERMIT TERM NO & Description	(choos	Requirement se one) poth	ACTUAL METHOD USED TO DETERMINE COMPLIANCE	DEVIATION INFORMATIOI		DEVIATION NFORMATION		CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A	MALFUNCTION VERBAL REPORT(S) DATE(S)	MALI W RE. D
		Quarterly	Semi- Annual		DEVIA DURA	ATION ATION	DESCRIPTION AND MAGNITUDE			MALFUNCTION? (Yes or No - If Yes, continue to the next column)	(If no reports were made, state ANO REPORTS@ in the space below)	(If r we sta REF
					DATE/TIME START	DATE/TIM E END	OF THE DEVIATION			the next column	space below)	the s
R/ IR/ IA :)	A.III.1-Record the pressure drop across the baghouse on a daily basis.		×	Records of daily pressure drop readings	06/14/13	06/16/13	Three daily ΔP records are missing.	Daily ΔP record was not recorded.	A Title V compliance plan and training program are currently being implemented across all process operations.	No	No	

FACILITY NAME: BASF Corp.			
FACILITY ID (PREMISE NUMBER): 0	2-47-04-0195		
FACILITY ADDRESS: 120 Pine Street	;, Elyria, OH 44035		
Issuance or most recent modification d	ate: 07/27/01		
QUARTERLY Reporting Period		SEMIANNUAL Reporting Period	
From: NA	To: NA	From: 01/01/13	To: 06/30/13
Reporting deadline: 07/31/2013			

NS J) otion w)	TITLE V PERMIT TERM NO & Description	(choos	Requirement se one) poth	ACTUAL METHOD USED TO DETERMINE COMPLIANCE	DEVIATION INFORMATIO			PROBABLE CAUSE FOR THE DEVIATION	CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A MAI FUNCTION 2	DEVIATION ATTRIBUTABLE TO A	MALFUNCTION VERBAL REPORT(S) DATE(S) (If no reports were	MALI W RE. D (If r
		Quarterly	Semi- Annual		DEVIA DURA		DESCRIPTION AND MAGNITUDE			(Yes or No - If Yes, continue to the next column)	made, state ANO REPORTS@ in the space below)	we sta REF	
					DATE/TIME START	DATE/TIM E END	OF THE DEVIATION			the next column	space below)	the s	
ER/ NA !)	A.III.1-Record the pressure drop across the baghouse on a daily basis.		×	Records of daily pressure drop readings	06/22/13	06/23/13	Two daily ΔP records are missing.	Daily ΔP record was not recorded.	A Title V compliance plan and training program are currently being implemented across all process operations.	No	No		

FACILITY NAME: BASF Corp.			
FACILITY ID (PREMISE NUMBE	R): 02-47-04-0195		
FACILITY ADDRESS: 120 Pine	Street, Elyria, OH 44035		
Issuance or most recent modifica	ation date: 07/27/01		
QUARTERLY Reporting Period		SEMIANNUAL Reporting Perio	od
From: NA	To: NA	From: 01/01/13	To: 06/30/13
Reporting deadline: 07/31/2013			

NS J) otion w)	TITLE V PERMIT TERM NO & Description	(choos	Requirement se one) ooth	ACTUAL METHOD USED TO DETERMINE COMPLIANCE	DEVIATION INFORMATION			PROBABLE CAUSE FOR THE DEVIATION	CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A	MALFUNCTION VERBAL REPORT(S) DATE(S)	MALI W RE. D
		Quarterly	Semi- Annual		DEVIA DURA		DESCRIPTION AND MAGNITUDE			MALFUNCTION? (Yes or No - If Yes, continue to the next column)	(If no reports were made, state ANO REPORTS@ in the	(If r we sta REF
					DATE/TIME START	DATE/TIM E END	OF THE DEVIATION			the heat column)	space below)	the s
at on )	A.III.1- Perform weekly checks, when the emissions unit is in operation and when the weather conditions allow, for any visible particulate emissions from the stack serving this emissions unit.		×	Records of weekly VE checks	01/01/13	01/27/13	A total of 4 weekly VE checks were not performed.	Facility personnel change over and inadequate Title V training processes.	A Title V compliance plan and training program are currently being implemented across all process operations.	No	No	

FACILITY NAME: BASF Corp.			
FACILITY ID (PREMISE NUMBE	R): 02-47-04-0195		
FACILITY ADDRESS: 120 Pine	Street, Elyria, OH 44035		
Issuance or most recent modifica	ation date: 07/27/01		
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From: NA	To: NA	From: 01/01/13	To: 06/30/13
Reporting deadline: 07/31/2013			

NS J) otion w)	TITLE V PERMIT TERM NO & Description	(choos	Requirement se one) poth	ACTUAL METHOD USED TO DETERMINE COMPLIANCE		DEVIATION INFORMATIO		PROBABLE CAUSE FOR THE DEVIATION	CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A	MALFUNCTION VERBAL REPORT(S) DATE(S)	MALI W RE. D
		Quarterly	Semi- Annual			ATION ATION	DESCRIPTION AND			MALFUNCTION? (Yes or No - If Yes, continue to the next column)	(If no reports were made, state ANO REPORTS@ in the	(If r we sta REF
					DATE/TIME START	DATE/TIM E END	MAGNITUDE OF THE DEVIATION			the next column	space below)	the s
AT rs)	A.III.1- Perform weekly checks, when the emissions unit is in operation and when the weather conditions allow, for any visible particulate emissions from the stack serving this emissions unit.		×	Records of weekly VE checks	01/01/13	01/27/13	A total of 4 weekly VE checks were not performed during the reporting period.	Facility personnel change over and inadequate Title V training processes.	A Title V compliance plan and training program are currently being implemented across all process operations	No	No	

FACILITY NAME: BASF Corp.			
FACILITY ID (PREMISE NUMBER): 02	2-47-04-0195		
FACILITY ADDRESS: 120 Pine Street	, Elyria, OH 44035		
Issuance or most recent modification d	ate: 07/27/01		
QUARTERLY Reporting Period		SEMIANNUAL Reporting Period	
From: NA	To: NA	From: 01/01/13	To: 06/30/13
Reporting deadline: 07/31/2013			

NS J) otion w)	TITLE V PERMIT TERM NO & Description	(choos	Requirement se one) poth	ACTUAL METHOD USED TO DETERMINE COMPLIANCE		DEVIATION INFORMATIO		PROBABLE CAUSE FOR THE DEVIATION	CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A	MALFUNCTION VERBAL REPORT(S) DATE(S)	MALI W RE. D
		Quarterly	Semi- Annual			ATION ATION	DESCRIPTION AND MAGNITUDE			MALFUNCTION? (Yes or No - If Yes, continue to the next column)	(If no reports were made, state ANO REPORTS@ in the	(If r we sta REF
					DATE/TIME START	DATE/TIM E END	OF THE DEVIATION			the next column	space below)	the s
AT (s)	A.III.1- Perform weekly checks, when the emissions unit is in operation and when the weather conditions allow, for any visible particulate emissions from the stack serving this emissions unit.		×	Records of weekly VE checks	01/01/13	01/27/13	A total of 4 weekly VE checks were not performed during the reporting period.	Facility personnel change over and inadequate Title V training processes.	A Title V compliance plan and training program are currently being implemented across all process operations	No	No	

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FACILITY NAME: BASF Corp.			
FACILITY ID (PREMISE NUMBER): 02	2-47-04-0195		
FACILITY ADDRESS: 120 Pine Street	, Elyria, OH 44035		
Issuance or most recent modification d	ate: 07/27/01		
QUARTERLY Reporting Period		SEMIANNUAL Reporting Period	
From: NA	To: NA	From: 01/01/13	To: 06/30/13
Reporting deadline: 07/31/2013			

NS J) otion ⊗)	TITLE V PERMIT TERM NO & Description	(choos	Requirement se one) poth	ACTUAL METHOD USED TO DETERMINE COMPLIANCE		DEVIATION INFORMATIO		PROBABLE CAUSE FOR THE DEVIATION	CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A	MALFUNCTION VERBAL REPORT(S) DATE(S)	MALI W RE. D
		Quarterly	Semi- Annual		DEVIA DURA	ATION ATION	DESCRIPTION AND MAGNITUDE			MALFUNCTION? (Yes or No - If Yes, continue to the next column)	(If no reports were made, state ANO REPORTS@ in the space below)	(If r we sta REF
					DATE/TIME START	DATE/TIM E END	OF THE DEVIATION			the next column	space below)	the s
olor , 1ill)	A.III.1- Perform weekly checks, when the emissions unit is in operation and when the weather conditions allow, for any visible particulate emissions from the stack serving this emissions unit.		×	Records of weekly VE checks	01/01/13	01/27/13	A total of 4 weekly VE checks were not performed.	Facility personnel change over and inadequate Title V training processes.	A Title V compliance plan and training program are currently being implemented across all process operations.	No	No	

FACILITY NAME: BASF Corp.			
FACILITY ID (PREMISE NUMB	ER): 02-47-04-0195		
FACILITY ADDRESS: 120 Pine	e Street, Elyria, OH 44035		
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QUARTERLY Reporting Period	QUARTERLY Reporting Period		od
From: NA	To: NA	From: 01/01/13	To: 06/30/13
Reporting deadline: 07/31/2013			

NS J) otion w)	TITLE V PERMIT TERM NO & Description	Reporting Requirement (choose one) or both		(choose one) DETERMINE		DEVIATION INFORMATION			PROBABLE CORRECTIVE CAUSE FOR ACTIONS / THE PREVENTATIVE DEVIATION MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A	VERBAL REPORT(S) DATE(S)	MALI W RE D	
		Quarterly	Semi- Annual		DEVIATION DURATION		DESCRIPTION AND MAGNITUDE			(Yes or No - If made, state ANO Yes, continue to REPORTS@ in the	(Yes or No - If reference to Re		(If r we sta REF
					DATE/TIME START	DATE/TIM E END	OF THE DEVIATION			the next column)	space below)	the sp	
olet pt)	A.III.1- Perform weekly checks, when the emissions unit is in operation and when the weather conditions allow, for any visible particulate emissions from the stack serving this emissions unit.		×	Records of weekly VE checks	01/01/13	01/27/13	A total of 4 weekly VE checks were not performed.	Facility personnel change over and inadequate Title V training processes.	A Title V compliance plan and training program are currently being implemented across all process operations.	No	No		

FACILITY NAME: BASF Corp.			
FACILITY ID (PREMISE NUMBE	R): 02-47-04-0195		
FACILITY ADDRESS: 120 Pine	Street, Elyria, OH 44035		
Issuance or most recent modifica	ation date: 07/27/01		
QUARTERLY Reporting Period		SEMIANNUAL Reporting Perio	od
From: NA	To: NA	From: 01/01/13	To: 06/30/13
Reporting deadline: 07/31/2013	Reporting deadline: 07/31/2013		

NS J) otion w)	TITLE V PERMIT TERM NO & Description	(choos	Requirement se one) ooth	ACTUAL METHOD USED TO DETERMINE COMPLIANCE	DEVIATION INFORMATION						MALFUNCTION VERBAL REPORT(S) DATE(S)	MALI W RE. D	
		Quarterly	Semi- Annual		DEVIA DURA	ATION ATION	DESCRIPTION AND MAGNITUDE			(Yes or No - If made, star Yes, continue to REPORTS	(Yes or No - If made, state ANO Yes, continue to REPORTS@ in the	(If no reports were made, state ANO REPORTS@ in the space below)	(If r we sta REF
					DATE/TIME START	DATE/TIM E END	OF THE DEVIATION			the next column	space below)	the s	
blet )	A.III.1- Perform weekly checks, when the emissions unit is in operation and when the weather conditions allow, for any visible particulate emissions from the stack serving this emissions unit.		×	Records of weekly VE checks	01/01/13	01/27/13	A total of 4 weekly VE checks were not performed.	Facility personnel change over and inadequate Title V training processes.	A Title V compliance plan and training program are currently being implemented across all process operations.	No	No		

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FACILITY NAME: BASF Corp.			
FACILITY ID (PREMISE NUMBER): 02	2-47-04-0195		
FACILITY ADDRESS: 120 Pine Street	, Elyria, OH 44035		
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Reporting deadline: 07/31/2013			

NS J) otion w)	TITLE V PERMIT TERM NO & Description	Reporting Requirement (choose one) or both		(choose one) DETERMINE		DEVIATION INFORMATION			PROBABLE CORRECTIVE CAUSE FOR ACTIONS / THE PREVENTATIVE DEVIATION MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A	VERBAL REPORT(S) DATE(S)	MALI W RE. D
		Quarterly	Semi- Annual		DEVIA DURA		DESCRIPTION AND MAGNITUDE			MALFUNCTION? (Yes or No - If Yes, continue to the next column)	(If no reports were made, state ANO REPORTS@ in the	(If r we sta REF
					DATE/TIME START	DATE/TIM E END	OF THE DEVIATION			the next column)	space below)	the sp
olet	A.III.1- Perform weekly checks, when the emissions unit is in operation and when the weather conditions allow, for any visible particulate emissions from the stack serving this emissions unit.		×	Records of weekly VE checks	01/01/13	01/27/13	A total of 4 weekly VE checks were not performed.	Facility personnel change over and inadequate Title V training processes.	A Title V compliance plan and training program are currently being implemented across all process operations.	No	No	

FACILITY NAME: BASF Corp.			
FACILITY ID (PREMISE NUMBER):	02-47-04-0195		
FACILITY ADDRESS: 120 Pine Stre	et, Elyria, OH 44035		
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NS J) otion w)	TITLE V PERMIT TERM NO & Description	Reporting Requirement (choose one) or both		(choose one) DETERMINE		DEVIATION INFORMATION			PROBABLE CORRECTIVE CAUSE FOR ACTIONS / THE PREVENTATIVE DEVIATION MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A	VERBAL REPORT(S) DATE(S)	MALI W RE. D
		Quarterly	Semi- Annual		DEVIA DURA	ATION ATION	DESCRIPTION AND MAGNITUDE			MALFUNCTION? (Yes or No - If Yes, continue to the next column)	(If no reports were made, state ANO REPORTS@ in the	(If r we sta REF
					DATE/TIME START	DATE/TIM E END	OF THE DEVIATION			the next column	space below)	the s
r)	A.III.1- Perform weekly checks, when the emissions unit is in operation and when the weather conditions allow, for any visible particulate emissions from the stack serving this emissions unit.		×	Records of weekly VE checks	01/01/13	01/27/13	A total of 4 weekly VE checks were not performed during the reporting period.	Facility personnel change over and inadequate Title V training processes.	A Title V compliance plan and training program are currently being implemented across all process operations.	No	No	

FACILITY NAME: BASF Corp.			
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		Quarterly	Semi- Annual		DEVIA DURA		DESCRIPTION AND MAGNITUDE			MALFUNCTION? (Yes or No - If Yes, continue to the next column)	(If no reports were made, state ANO REPORTS@ in the space below)	(If r we sta REF
					DATE/TIME START	DATE/TIM E END	OF THE DEVIATION			the heat column)	space below)	the sp
) N	A.III.1.a-Collect and record the pressure drop across the scrubber, in inches of water, once each day.		×	Records of pressure drop readings	01/01/12	01/06/12	A total of 8 daily ΔP records are missing.	Facility personnel change over and inadequate Title V training processes.	A Title V compliance plan and training program are currently being implemented across all process operations.	No	No	

FACILITY NAME: BASF Corp.			
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		Quarterly	Semi- Annual		DEVIA DURA		DESCRIPTION AND MAGNITUDE			MALFUNCTION? (Yes or No - If Yes, continue to the next column)	(If no reports were made, state ANO REPORTS@ in the space below)	(If r we sta REF
					DATE/TIME START	DATE/TIM E END	OF THE DEVIATION			the next column)	space below)	the sp
, n	A.III.1.a-Collect and record the pressure drop across the scrubber, in inches of water, once each day.		×	Records of pressure drop readings	01/07/13	01/13/13	A total of 4 daily ΔP records are missing.	Facility personnel change over and inadequate Title V training processes.	A Title V compliance plan and training program are currently being implemented across all process operations.	No	No	

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FACILITY ID (PREMISE NUMBER): 02	2-47-04-0195		
FACILITY ADDRESS: 120 Pine Street	, Elyria, OH 44035		
Issuance or most recent modification d	ate: 07/27/01		
QUARTERLY Reporting Period		SEMIANNUAL Reporting Period	
From: NA	To: NA	From: 01/01/13	To: 06/30/13
Reporting deadline: 07/31/2013			

NS J) otion w)	TITLE V PERMIT TERM NO & Description	(choos	Requirement se one) poth	ACTUAL METHOD USED TO DETERMINE COMPLIANCE	DEVIATION INFORMATIOI			PROBABLE CAUSE FOR THE DEVIATION	CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A	MALFUNCTION VERBAL REPORT(S) DATE(S)	MALI W RE. D
		Quarterly	Semi- Annual		DEVIA DURA		DESCRIPTION AND MAGNITUDE			MALFUNCTION? (Yes or No - If Yes, continue to the next column)	(If no reports were made, state ANO REPORTS@ in the space below)	(If r we sta REF
					DATE/TIME START	DATE/TIM E END	OF THE DEVIATION			the heat column)	space below)	the sp
, n	A.III.1.a-Collect and record the pressure drop across the scrubber, in inches of water, once each day.		×	Records of pressure drop readings	01/20/12	01/21/12	A total of 4 daily ΔP records are missing.	Facility personnel change over and inadequate Title V training processes.	A Title V compliance plan and training program are currently being implemented across all process operations.	No	No	

FACILITY NAME: BASF Corp.			
FACILITY ID (PREMISE NUMBER): 02	2-47-04-0195		
FACILITY ADDRESS: 120 Pine Street	, Elyria, OH 44035		
Issuance or most recent modification d	ate: 07/27/01		
QUARTERLY Reporting Period		SEMIANNUAL Reporting Period	
From: NA	To: NA	From: 01/01/13	To: 06/30/13
Reporting deadline: 07/31/2013			

NS J) otion w)	TITLE V PERMIT TERM NO & Description	(choos	Requirement se one) poth	ACTUAL METHOD USED TO DETERMINE COMPLIANCE	DEVIATION INFORMATIOI		DEVIATION INFORMATION		CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A	MALFUNCTION VERBAL REPORT(S) DATE(S)	MALI W RE. D
		Quarterly	Semi- Annual		DEVIA DURA		DESCRIPTION AND MAGNITUDE			MALFUNCTION? (Yes or No - If Yes, continue to the next column)	(If no reports were made, state ANO REPORTS@ in the	(If r we sta REF
					DATE/TIME START	DATE/TIM E END	OF THE DEVIATION			the next column)	space below)	the sp
) N	A.III.1.a-Collect and record the pressure drop across the scrubber, in inches of water, once each day.		×	Records of pressure drop readings	01/29/13	01/29/13	A total of 2 daily ΔP records are missing.	Facility personnel change over and inadequate Title V training processes.	A Title V compliance plan and training program are currently being implemented across all process operations.	No	No	

FACILITY NAME: BASF Corp.			
FACILITY ID (PREMISE NUMBER):	02-47-04-0195		
FACILITY ADDRESS: 120 Pine Stre	et, Elyria, OH 44035		
Issuance or most recent modification	date: 07/27/01		
QUARTERLY Reporting Period		SEMIANNUAL Reporting Perio	od
From: NA	To: NA	From: 01/01/13	To: 06/30/13
Reporting deadline: 07/31/2013			·

NS J) otion w)	TITLE V PERMIT TERM NO & Description	(choos	Requirement se one) poth	ACTUAL METHOD USED TO DETERMINE COMPLIANCE	DEVIATION INFORMATIO			PROBABLE CAUSE FOR THE DEVIATION	CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A MALFUNCTION?	MALFUNCTION VERBAL REPORT(S) DATE(S) (If no reports were	MALI W RE: D (If r
		Quarterly	Semi- Annual		DEVIA DURA	ATION ATION	DESCRIPTION AND MAGNITUDE			(Yes or No - If Yes, continue to the next column)	made, state ANO REPORTS@ in the space below)	we sta REF
					DATE/TIME START	DATE/TIM E END	OF THE DEVIATION			the next column)	space below)	the s
) R	A.III.1.a-Collect and record the pressure drop across the scrubber, in inches of water, once each day.		×	Records of pressure drop readings	02/17/13	02/17/13	A total of 2 daily ΔP records are missing.	Facility personnel change over and inadequate Title V training processes.	A Title V compliance plan and training program are currently being implemented across all process operations.	No	No	

FACILITY NAME: BASF Corp.			
FACILITY ID (PREMISE NUMBER): 0.	2-47-04-0195		
FACILITY ADDRESS: 120 Pine Street	, Elyria, OH 44035		
Issuance or most recent modification d	ate: 07/27/01		
QUARTERLY Reporting Period		SEMIANNUAL Reporting Perio	od
From: NA	To: NA	From: 01/01/13	To: 06/30/13
Reporting deadline: 07/31/2013			

									T T			
NS J) otion w)	TITLE V PERMIT TERM NO & Description	Reporting Requirement USED TO ription (choose one) DETERMINE		ACTUAL METHOD USED TO DETERMINE COMPLIANCE	DEVIATION INFORMATION			PROBABLE CORRECTIVE CAUSE FOR ACTIONS / THE PREVENTATIVE DEVIATION MEASURES TAKEN		WAS THIS DEVIATION ATTRIBUTABLE TO A MALEUNICTION 3	N VERBAL BLE REPORT(S) DATE(S)	MAL W RE L (If:
		Quarterly	Semi- Annual			ATION ATION	DESCRIPTION AND MAGNITUDE			MALFUNCTION? (Yes or No - If Yes, continue to the next column)	(If no reports were made, state ANO REPORTS@ in the space below)	(If I we st REF
					DATE/TIME START	DATE/TIM E END	OF THE DEVIATION			the next columny	Space below)	the s
<b>)</b> २ )	A.III.1.b- Collect and record the scrubber water flow rate, in gallons per minute, once each day.		×	Records of scrubber water flow rate	01/01/13	01/06/13	A total of 8 daily scrubber water flow rate records are missing.	Facility personnel change over and inadequate Title V training processes.	A Title V compliance plan and training program are currently being implemented across all process	No	No	

FACILITY NAME: BASE Corp.			
FACILITY ID (PREMISE NUME	3ER): 02-47-04-0195		
FACILITY ADDRESS: 120 Pir	ne Street, Elyria, OH 44035		
Issuance or most recent modifi	cation date: 07/27/01		
QUARTERLY Reporting Perio	d	SEMIANNUAL Reporting Perio	od
From: NA	To: NA	From: 01/01/13	To: 06/30/13
Reporting deadline: 07/31/201	3		

NS otion w)	TITLE V PERMIT TERM NO & Description	(choos	Requirement se one) poth Semi- Annual	ACTUAL METHOD USED TO DETERMINE COMPLIANCE	DEVIATION INFORMATION DEVIATION DURATION			PROBABLE CAUSE FOR THE DEVIATION	FOR ACTIONS / PREVENTATIVE	WAS THIS DEVIATION ATTRIBUTABLE TO A MALFUNCTION? (Yes or No - If Yes, continue to the next column)	MALFUNCTION VERBAL REPORT(S) DATE(S) (If no reports were made, state ANO REPORTS@ in the space below)	MALI W RE. D (If r we sta REF
					DATE/TIME START	DATE/TIM E END	OF THE DEVIATION			une ment dolaminy	opace below)	the sp
) (Y	A.III.1.b- Collect and record the scrubber water flow rate, in gallons per minute, once each day.		×	Records of scrubber water flow rate	01/07/13	01/13/12	A total of 4 daily scrubber water flow rate records are missing.	Facility personnel change over and inadequate Title V training processes.	A Title V compliance plan and training program are currently being implemented across all process operations.	No	No	

FACILITY NAME: BASF Corp.			
FACILITY ID (PREMISE NUMBE	R): 02-47-04-0195		
FACILITY ADDRESS: 120 Pine	Street, Elyria, OH 44035		
Issuance or most recent modifica	ation date: 07/27/01		
QUARTERLY Reporting Period		SEMIANNUAL Reporting Perio	od
From: NA	To: NA	From: 01/01/13	To: 06/30/13
Reporting deadline: 07/31/2013			

NS J) otion w)	TITLE V PERMIT TERM NO & Description	(choos	Requirement se one) poth	ACTUAL METHOD USED TO DETERMINE COMPLIANCE	DEVIATION INFORMATIO			PROBABLE CAUSE FOR THE DEVIATION	CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A MALFUNCTION?	DEVIATION VERBAL ATTRIBUTABLE REPORT(S) TO A DATE(S)		MALI W RE: D (If r
		Quarterly	Semi- Annual		DEVIA DURA		DESCRIPTION AND MAGNITUDE			(Yes or No - If Yes, continue to the next column)	made, state ANO REPORTS@ in the space below)	we sta REP	
					DATE/TIME START	DATE/TIM E END	OF THE DEVIATION			the next column)	space below)	the s	
) R	A.III.1.b- Collect and record the scrubber water flow rate, in gallons per minute, once each day.		X	Records of scrubber water flow rate	01/20/13	01/21/13	A total of 4 daily scrubber water flow rate records are missing.	Facility personnel change over and inadequate Title V training processes.	A Title V compliance plan and training program are currently being implemented across all process operations.	No	No		

FACILITY NAME: BASE Co.	rp.		
FACILITY ID (PREMISE NUI	MBER): 02-47-04-0195		
FACILITY ADDRESS: 120 F	Pine Street, Elyria, OH 44035		
Issuance or most recent mod	dification date: 07/27/01		
QUARTERLY Reporting Per	riod	SEMIANNUAL Reporting Perio	od
From: NA	To: NA	From: 01/01/13	To: 06/30/13
Reporting deadline: 07/31/20	013		

NS J) otion w)	TITLE V PERMIT TERM NO & Description	(choos	Requirement se one) both Semi- Annual	ACTUAL METHOD USED TO DETERMINE COMPLIANCE	DURA	DEVIATION INFORMATION  DEVIATION DURATION  DATE/TIME DATE/TIM		PROBABLE CAUSE FOR THE DEVIATION	CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A MALFUNCTION? (Yes or No - If Yes, continue to the next column)	MALFUNCTION VERBAL REPORT(S) DATE(S) (If no reports were made, state ANO REPORTS@ in the space below)	MALI W RE. D (If r we sta REF the sp
					START	E END	OF THE DEVIATION					ine sp
γ )	A.III.1.b- Collect and record the scrubber water flow rate, in gallons per minute, once each day.		×	Records of scrubber water flow rate	01/29/13	01/29/13	A total of 2 daily scrubber water flow rate records are missing.	Facility personnel change over and inadequate Title V training processes.	A Title V compliance plan and training program are currently being implemented across all process operations.	No	No	

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FACILITY NAME: BASE Corp.			
FACILITY ID (PREMISE NUME	3ER): 02-47-04-0195		
FACILITY ADDRESS: 120 Pir	ne Street, Elyria, OH 44035		
Issuance or most recent modifi	cation date: 07/27/01		
QUARTERLY Reporting Perio	d	SEMIANNUAL Reporting Perio	od
From: NA	To: NA	From: 01/01/13	To: 06/30/13
Reporting deadline: 07/31/201	3		

NS J) otion w)	TITLE V PERMIT TERM NO & Description	(choos	Requirement se one) poth	ACTUAL METHOD USED TO DETERMINE COMPLIANCE	DEVIATION INFORMATIOI		DEVIATION INFORMATION		CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A	MALFUNCTION VERBAL REPORT(S) DATE(S)	MALI W RE. D
		Quarterly	Semi- Annual		DEVIA DURA	ATION ATION	DESCRIPTION AND MAGNITUDE			MALFUNCTION? (Yes or No - If Yes, continue to the next column)	(If no reports were made, state ANO REPORTS@ in the	(If r we sta REF
					DATE/TIME START	DATE/TIM E END	OF THE DEVIATION			the next column	space below)	the s
, N (	A.III.1.b- Collect and record the scrubber water flow rate, in gallons per minute, once each day.		×	Records of scrubber water flow rate	02/17/13	02/17/13	A total of 2 daily scrubber water flow rate records are missing.	Facility personnel change over and inadequate Title V training processes.	A Title V compliance plan and training program are currently being implemented across all process operations.	No	No	

FACILITY NAME: BASF Corp.			
FACILITY ID (PREMISE NUMBER): 0	2-47-04-0195		
FACILITY ADDRESS: 120 Pine Street	;, Elyria, OH 44035		
Issuance or most recent modification d	ate: 07/27/01		
QUARTERLY Reporting Period		SEMIANNUAL Reporting Period	
From: NA	To: NA	From: 01/01/13	To: 06/30/13
Reporting deadline: 07/31/2013			

NS J) otion w)	TITLE V PERMIT TERM NO & Description	(choos	Requirement se one) ooth	ACTUAL METHOD USED TO DETERMINE COMPLIANCE	DEVIATION INFORMATIO			PROBABLE CAUSE FOR THE DEVIATION	CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A	MALFUNCTION VERBAL REPORT(S) DATE(S)	MALI W RE. D
		Quarterly	Semi- Annual		DEVIA DURA		DESCRIPTION AND MAGNITUDE			MALFUNCTION? (Yes or No - If Yes, continue to the next column)	(If no reports were made, state ANO REPORTS@ in the space below)	(If r we sta REF
					DATE/TIME START	DATE/TIM E END	OF THE DEVIATION			the next columny	space below)	the s
RY ER	A.III.2- Perform weekly checks, when the emissions unit is in operation and when the weather conditions allow, for any visible particulate emissions from the stack serving this emissions unit.		×	Records of weekly VE checks	01/01/13	01/27/13	A total of 4 weekly VE checks were not performed during the reporting period.	Facility personnel change over and inadequate Title V training processes.	A Title V compliance plan and training program are currently being implemented across all process operations.	No	No	

FACILITY NAME: BASF Corp.			
FACILITY ID (PREMISE NUMBER): 0	2-47-04-0195		
FACILITY ADDRESS: 120 Pine Street	;, Elyria, OH 44035		
Issuance or most recent modification d	ate: 07/27/01		
QUARTERLY Reporting Period		SEMIANNUAL Reporting Period	
From: NA	To: NA	From: 01/01/13	To: 06/30/13
Reporting deadline: 07/31/2013			

NS J) otion w)	TITLE V PERMIT TERM NO & Description	(choos	Requirement se one) ooth	ACTUAL METHOD USED TO DETERMINE COMPLIANCE		DEVIATION INFORMATION		PROBABLE CAUSE FOR THE DEVIATION	CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A	MALFUNCTION VERBAL REPORT(S) DATE(S)	MALI W RE. D
		Quarterly	Semi- Annual		DEVIA DURA	ATION ATION	DESCRIPTION AND MAGNITUDE			MALFUNCTION? (Yes or No - If Yes, continue to the next column)	(If no reports were made, state ANO REPORTS@ in the space below)	(If r we sta REF
					DATE/TIME START	DATE/TIM E END	OF THE DEVIATION			une next columny	space below)	the s
RY ER	B.III.1.a-Collect and record the pressure drop across each stage of the scrubber, in inches of water, on a once per shift basis.		х	Records of pressure drop readings for Stages 1, 2, 3	01/01/13	01/04/13	A total of 6 once/shift ΔP records are missing for the three scrubber stages.	Failure in data acquisition	Restored.	No	No	

FACILITY NAME: BASF Corp.			
FACILITY ID (PREMISE NUMBER):	02-47-04-0195		
FACILITY ADDRESS: 120 Pine Stre	et, Elyria, OH 44035		
Issuance or most recent modification	date: 07/27/01		
QUARTERLY Reporting Period		SEMIANNUAL Reporting Perio	od
From: NA	To: NA	From: 01/01/13	To: 06/30/13
Reporting deadline: 07/31/2013			·

NS J) otion w)	TITLE V PERMIT TERM NO & Description	(choos	Requirement se one) poth	ACTUAL METHOD USED TO DETERMINE COMPLIANCE		DEVIATION INFORMATION		PROBABLE CAUSE FOR THE DEVIATION	CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A MALEUNICTION 2	MALFUNCTION VERBAL REPORT(S) DATE(S)	MALI W RE. D
		Quarterly	Semi- Annual		DEVIA DURA DATE/TIME		DESCRIPTION AND MAGNITUDE OF THE			MALFUNCTION? (Yes or No - If Yes, continue to the next column)	(If no reports were made, state ANO REPORTS@ in the space below)	(If r we sta REF the sp
					START	E END	DEVIATION					
R ER	B.III.1.a-Collect and record the pressure drop across each stage of the scrubber, in inches of water, on a once per shift basis.		x	Records of pressure drop readings for Stages 1, 2, 3	01/14/13	01/15/13	A total of 6 once/shift ΔP records are missing for the three scrubber stages.	Failure in data acquisition	Restored.	No	No	

FACILITY NAME: BASF Corp.			
FACILITY ID (PREMISE NUMBER):	02-47-04-0195		
FACILITY ADDRESS: 120 Pine Stre	et, Elyria, OH 44035		
Issuance or most recent modification	date: 07/27/01		
QUARTERLY Reporting Period		SEMIANNUAL Reporting Perio	od
From: NA	To: NA	From: 01/01/13	To: 06/30/13
Reporting deadline: 07/31/2013			·

NS J) otion w)	TITLE V PERMIT TERM NO & Description	Reporting Requirement (choose one) or both		ACTUAL METHOD USED TO DETERMINE COMPLIANCE	INFORM.		DEVIATION INFORMATION		CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A	MALFUNCTION VERBAL REPORT(S) DATE(S)	MALI W RE. D
		Quarterly	Semi- Annual		DEVIA DURA DATE/TIME START		DESCRIPTION AND MAGNITUDE OF THE DEVIATION			MALFUNCTION? (Yes or No - If Yes, continue to the next column)	made, state ANO REPORTS@ in the space below)	(If r we sta REF the sp
RY ER	B.III.1.a-Collect and record the pressure drop across each stage of the scrubber, in inches of water, on a once per shift basis.		×	Records of pressure drop readings for Stages 1, 2, 3	03/16/13	03/16/13	A total of 3 once/shift ΔP records are missing for the three scrubber stages.	Failure in data acquisition	Restored	No	No	

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FACILITY NAME: BASF Corp.			
FACILITY ID (PREMISE NUMBER): 02	2-47-04-0195		
FACILITY ADDRESS: 120 Pine Street	, Elyria, OH 44035		
Issuance or most recent modification d	ate: 07/27/01		
QUARTERLY Reporting Period		SEMIANNUAL Reporting Period	
From: NA	To: NA	From: 01/01/13	To: 06/30/13
Reporting deadline: 07/31/2013			

NS J) otion w)	TITLE V PERMIT TERM NO & Description	(choos	Requirement se one) ooth	ACTUAL METHOD USED TO DETERMINE COMPLIANCE		DEVIATION INFORMATION						PROBABLE CAUSE FOR THE DEVIATION	CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A	MALFUNCTION VERBAL REPORT(S) DATE(S)	MALI W RE. D
		Quarterly	Semi- Annual		DEVIA DURA DATE/TIME	DATE/TIM	DESCRIPTION AND MAGNITUDE OF THE			MALFUNCTION? (Yes or No - If Yes, continue to the next column)	(If no reports were made, state ANO REPORTS@ in the space below)	(If r we sta REF the sa				
					START	E END	A total of 3									
RY ER	B.III.1.a-Collect and record the pressure drop across each stage of the scrubber, in inches of water, on a once per shift basis.		×	Records of pressure drop readings for Stages 1, 2, 3	03/29/13	03/29/13	once/shift ΔP records are missing for the three scrubber stages.	Failure in data acquisition	Restored.	No	No					

FACILITY NAME: BASF Corp.			
FACILITY ID (PREMISE NUMBER): 0	2-47-04-0195		
FACILITY ADDRESS: 120 Pine Street	;, Elyria, OH 44035		
Issuance or most recent modification d	ate: 07/27/01		
QUARTERLY Reporting Period		SEMIANNUAL Reporting Period	
From: NA	To: NA	From: 01/01/13	To: 06/30/13
Reporting deadline: 07/31/2013			

NS J) otion w)	TITLE V PERMIT TERM NO & Description	(choos	Requirement se one) ooth	ACTUAL METHOD USED TO DETERMINE COMPLIANCE		DEVIATION INFORMATION		PROBABLE CAUSE FOR THE DEVIATION	CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A	MALFUNCTION VERBAL REPORT(S) DATE(S)	MALI W RE: D
	]	Quarterly	Semi- Annual		DEVIA DURA	ATION ATION	DESCRIPTION AND MAGNITUDE			MALFUNCTION? (Yes or No - If Yes, continue to the next column)	(If no reports were made, state ANO REPORTS@ in the space below)	(If r we sta REF
	]				DATE/TIME START	DATE/TIM E END	OF THE DEVIATION			the next columny	Space below)	the s
RY ER	B.III.1.a-Collect and record the pressure drop across each stage of the scrubber, in inches of water, on a once per shift basis.		X	Records of pressure drop readings for Stages 1, 2, 3	04/14/13	04/14/13	A total of 3 once/shift ΔP records are missing for the three scrubber stages.	Failure in data acquisition software.	Connection was restored.	No	No	

FACILITY NAME: BASF Corp.			
FACILITY ID (PREMISE NUMBER): (	)2-47-04-0195		
FACILITY ADDRESS: 120 Pine Stree	t, Elyria, OH 44035		
Issuance or most recent modification of	date: 07/27/01		
QUARTERLY Reporting Period		SEMIANNUAL Reporting Perio	od
From: NA	To: NA	From: 01/01/13	To: 06/30/13
Reporting deadline: 07/31/2013			•

NS J) otion (§)	TITLE V PERMIT TERM NO & Description	(choos	Requirement se one) ooth	ACTUAL METHOD USED TO DETERMINE COMPLIANCE	DEVIATION INFORMATION			PROBABLE CAUSE FOR THE DEVIATION	CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A	MALFUNCTION VERBAL REPORT(S) DATE(S)	MALI W RE. D
		Quarterly	Semi- Annual		DEVIA DURA	ATION ATION	DESCRIPTION AND			MALFUNCTION? (Yes or No - If Yes, continue to the next column)	(If no reports were made, state ANO REPORTS@ in the	(If r we sta REF
					DATE/TIME START	DATE/TIM E END	MAGNITUDE OF THE DEVIATION			the next column	space below)	the s
) RY ER	B.III.1.b-Collect and record the flow rate for each stage of the scrubber, in gpm of water, on a once per shift basis.		x	Records of flow rate readings for Stages 1, 2, 3	01/01/13	04/04/13	A total of 6 once/shift flow rate records are missing for the three scrubber stages.	Failure in data acquisition	Restored.	No	No	

FACILITY NAME: BASF Corp.			
FACILITY ID (PREMISE NUMBER): (	)2-47-04-0195		
FACILITY ADDRESS: 120 Pine Stree	t, Elyria, OH 44035		
Issuance or most recent modification of	date: 07/27/01		
QUARTERLY Reporting Period		SEMIANNUAL Reporting Perio	od
From: NA	To: NA	From: 01/01/13	To: 06/30/13
Reporting deadline: 07/31/2013			•

NS J) otion w)	TITLE V PERMIT TERM NO & Description	RM Reporting Requirement USED TO scription (choose one) DETERMINE		ACTUAL METHOD USED TO DETERMINE COMPLIANCE	DEVIATION INFORMATION			PROBABLE CAUSE FOR THE DEVIATION	CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A	N VERBAL BLE REPORT(S) DATE(S)	MALI W RE. D
		Quarterly	Semi- Annual			ATION ATION	DESCRIPTION AND MAGNITUDE			MALFUNCTION? (Yes or No - If Yes, continue to the next column)	(If no reports were made, state ANO REPORTS@ in the space below)	(If r we sta REF
					DATE/TIME START	DATE/TIM E END	OF THE DEVIATION			the next columny	space below)	the s
) RY ER	B.III.1.b-Collect and record the flow rate for each stage of the scrubber, in gpm of water, on a once per shift basis.		×	Records of flow rate readings for Stages 1, 2, 3	01/14/13	04/15/13	A total of 6 once/shift flow rate records are missing for the three scrubber stages.	Failure in data acquisition	Restored.	No	No	

FACILITY NAME: BASF Corp.			
FACILITY ID (PREMISE NUMBER): 0	2-47-04-0195		
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NS J) otion (%)	TITLE V PERMIT TERM NO & Description	(choos	Requirement se one) ooth	ACTUAL METHOD USED TO DETERMINE COMPLIANCE	DEVIATION INFORMATION			PROBABLE CAUSE FOR THE DEVIATION	CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A	MALFUNCTION VERBAL REPORT(S) DATE(S)	RE.
		Quarterly	Semi- Annual		DEVIA DURA	ATION ATION	DESCRIPTION AND MAGNITUDE			MALFUNCTION? (Yes or No - If Yes, continue to the next column)	(If no reports were made, state ANO REPORTS@ in the space below)	(If r we sta REF
					DATE/TIME START	DATE/TIM E END	OF THE DEVIATION			the next column	space below)	the s
) RY ER	B.III.1.b-Collect and record the flow rate for each stage of the scrubber, in gpm of water, on a once per shift basis.		x	Records of flow rate readings for Stages 1, 2, 3	03/16/13	03/16/13	A total of 3 once/shift flow rate records are missing for the three scrubber stages.	Failure in data acquisition	Restored.	No	No	

FACILITY NAME: BASF Corp.			
FACILITY ID (PREMISE NUMBER): 0	2-47-04-0195		
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Reporting deadline: 07/31/2013			

NS J) otion (%)	TITLE V PERMIT TERM NO & Description	(choos	Requirement se one) ooth	ACTUAL METHOD USED TO DETERMINE COMPLIANCE	DEVIATION INFORMATION			PROBABLE CAUSE FOR THE DEVIATION	CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A	MALFUNCTION VERBAL REPORT(S) DATE(S)	RE D
		Quarterly	Semi- Annual		DEVIA DURA	ATION ATION	DESCRIPTION AND MAGNITUDE			MALFUNCTION? (Yes or No - If Yes, continue to the next column)	(If no reports were made, state ANO REPORTS@ in the space below)	(If r we sta REF
					DATE/TIME START	DATE/TIM E END	OF THE DEVIATION			the next column)	space below)	the s
) RY ER	B.III.1.b-Collect and record the flow rate for each stage of the scrubber, in gpm of water, on a once per shift basis.		x	Records of flow rate readings for Stages 1, 2, 3	03/29/13	03/29/13	A total of 3 once/shift flow rate records are missing for the three scrubber stages.	Failure in data acquisition	Restored.	No	No	

FACILITY NAME: BASF Corp.			
FACILITY ID (PREMISE NUMB	ER): 02-47-04-0195		
FACILITY ADDRESS: 120 Pine	e Street, Elyria, OH 44035		
Issuance or most recent modific	cation date: 07/27/01		
QUARTERLY Reporting Period	1	SEMIANNUAL Reporting Perio	od
From: NA	To: NA	From: 01/01/13	To: 06/30/13
Reporting deadline: 07/31/2013	3		•

NS J) otion w)	TITLE V PERMIT TERM NO & Description	(choos	Requirement se one) poth	ACTUAL METHOD USED TO DETERMINE COMPLIANCE	DEVIATION INFORMATION			PROBABLE CAUSE FOR THE DEVIATION	CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A MALFUNCTION?	MALFUNCTION VERBAL REPORT(S) DATE(S) (If no reports were	MALI W RE. D (If r
		Quarterly	Semi- Annual		DEVIA DURA	ATION ATION	DESCRIPTION AND MAGNITUDE			(Yes or No - If Yes, continue to the next column)	made, state ANO REPORTS@ in the space below)	we sta REP
					DATE/TIME START	DATE/TIM E END	OF THE DEVIATION			une next columny	space below)	the s
) RY ER	B.III.1.b-Collect and record the flow rate for each stage of the scrubber, in gpm of water, on a once per shift basis.		×	Records of flow rate readings for Stages 1, 2, 3	04/14/13	04/14/13	A total of 3 once/shift flow rate records are missing for the three scrubber stages.	Failure in data acquisition	Restored.	No	No	

FACILITY NAME: BASF Corp.			
FACILITY ID (PREMISE NUMBER): 02	2-47-04-0195		
FACILITY ADDRESS: 120 Pine Street	, Elyria, OH 44035		
Issuance or most recent modification d	ate: 07/27/01		
QUARTERLY Reporting Period		SEMIANNUAL Reporting Period	
From: NA	To: NA	From: 01/01/13	To: 06/30/13
Reporting deadline: 07/31/2013			

NS J) otion w)	TITLE V PERMIT TERM NO & Description	(choos	Requirement se one) ooth	ACTUAL METHOD USED TO DETERMINE COMPLIANCE	DEVIATION INFORMATION			PROBABLE CAUSE FOR THE DEVIATION	CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A	MALFUNCTION VERBAL REPORT(S) DATE(S)	MALI W RE. D
		Quarterly	Semi- Annual		DEVIA DURA	ATION ATION	DESCRIPTION AND MAGNITUDE			MALFUNCTION? (Yes or No - If Yes, continue to the next column)	(If no reports were made, state ANO REPORTS@ in the space below)	(If r we sta REF
					DATE/TIME START	DATE/TIM E END	OF THE DEVIATION			the next column	space below)	the s
) RY ER	B.III.2.b-Collect and record the pH of the scrubber, in s.u. of water, on a once per shift basis.		x	Records of pH readings	01/01/13	01/04/13	A total of 2 once/shift flow rate records are missing for the three scrubber stages.	Failure in data acquisition	Restored.	No	No	

FACILITY NAME: BASF Corp.			
FACILITY ID (PREMISE NUMBER):	02-47-04-0195		
FACILITY ADDRESS: 120 Pine Stre	et, Elyria, OH 44035		
Issuance or most recent modification	date: 07/27/01		
QUARTERLY Reporting Period		SEMIANNUAL Reporting Perio	od
From: NA	To: NA	From: 01/01/13	To: 06/30/13
Reporting deadline: 07/31/2013			·

NS J) otion (%)	TITLE V PERMIT TERM NO & Description	(choos	Requirement se one) both	ACTUAL METHOD USED TO DETERMINE COMPLIANCE	DEVIATION INFORMATIOI			PROBABLE CAUSE FOR THE DEVIATION	CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A	MALFUNCTION VERBAL REPORT(S) DATE(S)	MALI W RE. D
		Quarterly	Semi- Annual		DEVIA DURA	ATION ATION	DESCRIPTION AND			MALFUNCTION? (Yes or No - If Yes, continue to the next column)	(If no reports were made, state ANO REPORTS@ in the	(If r we sta REF
					DATE/TIME START	DATE/TIM E END	MAGNITUDE OF THE DEVIATION			the next column)	space below)	the s
) RY ER	B.III.2.b-Collect and record the pH of the scrubber, in s.u. of water, on a once per shift basis.		x	Records of pH readings	01/14/13	01/15/13	A total of 2 once/shift flow rate records are missing for the three scrubber stages.	Failure in data acquisition	Restored.	No	No	

FACILITY NAME: BASF Corp.			
FACILITY ID (PREMISE NUMBER): 0	2-47-04-0195		
FACILITY ADDRESS: 120 Pine Street	;, Elyria, OH 44035		
Issuance or most recent modification d	ate: 07/27/01		
QUARTERLY Reporting Period		SEMIANNUAL Reporting Period	
From: NA	To: NA	From: 01/01/13	To: 06/30/13
Reporting deadline: 07/31/2013			

NS J) otion w)	TITLE V PERMIT TERM NO & Description	(choos	Requirement se one) poth Semi-	ACTUAL METHOD USED TO DETERMINE COMPLIANCE	DEVIATION INFORMATION  DEVIATION  DESCRIPTION			PROBABLE CAUSE FOR THE DEVIATION	CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A MALFUNCTION? (Yes or No - If	MALFUNCTION VERBAL REPORT(S) DATE(S) (If no reports were made, state ANO	MALI W RE. D (If r
		Quarterly	Annual		DURA		AND MAGNITUDE			Yes, continue to the next column)	REPORTS@ in the space below)	ste REF
					DATE/TIME START	DATE/TIM E END	OF THE DEVIATION			une mext columny	opuse selen)	the s
RY ER	B.III.2.b-Collect and record the pH of the scrubber, in s.u. of water, on a once per shift basis.		×	Records of pH readings	03/16/13	03/16/13	A total of 1 once/shift flow rate records are missing for the three scrubber stages.	Failure in data acquisition	Restored.	No	No	

FACILITY NAME: BASF Corp.			
FACILITY ID (PREMISE NUMBE	R): 02-47-04-0195		
FACILITY ADDRESS: 120 Pine	Street, Elyria, OH 44035		
Issuance or most recent modifica	ation date: 07/27/01		
QUARTERLY Reporting Period		SEMIANNUAL Reporting Perio	od
From: NA	To: NA	From: 01/01/13	To: 06/30/13
Reporting deadline: 07/31/2013			

NS J) otion w)	TITLE V PERMIT TERM NO & Description	M Reporting Requirement USED TO			DEVIATION INFORMATION			CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A	MALFUNCTION VERBAL REPORT(S) DATE(S)	MALI W RE. D	
		Quarterly	Semi- Annual		DEVIA DURA	ATION ATION	DESCRIPTION AND MAGNITUDE			MALFUNCTION? (Yes or No - If Yes, continue to the next column)	(If no reports were made, state ANO REPORTS@ in the space below)	(If r we sta REF
					DATE/TIME START	DATE/TIM E END	OF THE DEVIATION			the next column)	space below)	the s
) RY ER	B.III.2.b-Collect and record the pH of the scrubber, in s.u. of water, on a once per shift basis.		x	Records of pH readings	03/29/13	03/29/13	A total of 1 once/shift flow rate records are missing for the three scrubber stages.	Failure in data acquisition	Restored.	No	No	

·			
FACILITY NAME: BASF Corp.			
FACILITY ID (PREMISE NUMBER): 02	2-47-04-0195		
FACILITY ADDRESS: 120 Pine Street	, Elyria, OH 44035		
Issuance or most recent modification d	ate: 07/27/01		
QUARTERLY Reporting Period		SEMIANNUAL Reporting Period	
From: NA	To: NA	From: 01/01/13	To: 06/30/13
Reporting deadline: 07/31/2013			

NS J) otion w)	TITLE V PERMIT TERM NO & Description	Reporting Requirement (choose one) or both COMPLIANCE		DN I	PROBABLE CAUSE FOR THE DEVIATION	CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	ACTIONS / DEVIATION PREVENTATIVE ATTRIBUTABLE MEASURES TAKEN TO A MALFUNCTION ?		MALI W RE. D (If r			
		Quarterly	Semi- Annual		DEVIA DURA		DESCRIPTION AND MAGNITUDE			(Yes or No - If Yes, continue to the next column)	made, state ANO REPORTS⊕ in the space below)	we sta REF
					DATE/TIME START	DATE/TIM E END	OF THE DEVIATION				opude selewy	the sp
) RY ER	B.III.2.b-Collect and record the pH of the scrubber, in s.u. of water, on a once per shift basis.		×	Records of pH readings	04/14/13	04/14/13	A total of 1 once/shift flow rate records are missing for the three scrubber stages.	Failure in data acquisition	Restored.	No	No	

FACILITY NAME: BASE Corp.			
FACILITY ID (PREMISE NUME	3ER): 02-47-04-0195		
FACILITY ADDRESS: 120 Pir	ne Street, Elyria, OH 44035		
Issuance or most recent modifi	cation date: 07/27/01		
QUARTERLY Reporting Perio	d	SEMIANNUAL Reporting Perio	od
From: NA	To: NA	From: 01/01/13	To: 06/30/13
Reporting deadline: 07/31/201	3		

NS J) otion w)	TITLE V PERMIT TERM NO & Description	TERM Reporting Requirement		ACTUAL METHOD USED TO DETERMINE COMPLIANCE	DEVIATION INFORMATION			PROBABLE CAUSE FOR THE DEVIATION	CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	DEVIATION VE ATTRIBUTABLE KEN TO A	MALFUNCTION VERBAL REPORT(S) DATE(S)	MALI W RE. D
		Quarterly Semi- Annual		DEVIATION DURATION		DESCRIPTION AND MAGNITUDE			MALFUNCTION? (Yes or No - If Yes, continue to the next column)	(If no reports were made, state ANO REPORTS@ in the	(If r we sta REF	
					DATE/TIME START	DATE/TIM E END	OF THE DEVIATION			the next column	space below)	the s
ash	A.III.1- Perform weekly checks, when the emissions unit is in operation and when the weather conditions allow, for any visible particulate emissions from the stack serving this emissions unit.		×	Records of weekly VE checks	01/01/13	11/27/13	A total of 4 VE checks were not performed during the reporting period.	Facility personnel change over and inadequate Title V training processes.	A Title V compliance plan and training program are currently being implemented across all process operations	No	No	

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FACILITY NAME: BASF Corp.			
FACILITY ID (PREMISE NUMBE	R): 02-47-04-0195		
FACILITY ADDRESS: 120 Pine	Street, Elyria, OH 44035		
Issuance or most recent modifica	ation date: 07/27/01		
QUARTERLY Reporting Period		SEMIANNUAL Reporting Perio	od
From: NA	To: NA	From: 01/01/13	To: 06/30/13
Reporting deadline: 07/31/2013			

NS J) otion ®)	TITLE V PERMIT TERM NO & Description	(choos	Requirement se one) both Semi-	ACTUAL METHOD USED TO DETERMINE COMPLIANCE	DEVIATION INFORMATION				CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A MALFUNCTION? (Yes or No - If	MALFUNCTION VERBAL REPORT(S) DATE(S) (If no reports were made, state ANO	MALI W RE. D (If r we
		Annual		DURA DATE/TIME START	DATE/TIM E END	AND MAGNITUDE OF THE DEVIATION	Yes, continue to the next column)			REPORTS@ in the space below)	ste REF the sp	
er #2)	A.III.1- Record the pressure drop across the baghouse on daily basis.		Х	Records of daily pressure drop readings for discharge baghouse	01/01/13	02/10/13	A total of 43 daily ΔP record missing.	Failure in data acquisition	Troubleshooting data issue.	No	No	

FACILITY NAME: BASF Corp.			
FACILITY ID (PREMISE NUMBER): 02	2-47-04-0195		
FACILITY ADDRESS: 120 Pine Street	, Elyria, OH 44035		
Issuance or most recent modification d	ate: 07/27/01		
QUARTERLY Reporting Period		SEMIANNUAL Reporting Period	
From: NA	To: NA	From: 01/01/13	To: 06/30/13
Reporting deadline: 07/31/2013			

NS J) otion w)	TITLE V PERMIT TERM NO & Description	TERM Reporting		ACTUAL METHOD USED TO DETERMINE COMPLIANCE	DEVIATION INFORMATION			PROBABLE CORRECTIVE CAUSE FOR ACTIONS / THE PREVENTATIVE DEVIATION MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A	MALFUNCTION VERBAL REPORT(S) DATE(S)	MALI W RE. D	
		Quarterly	Quarterly Semi- Annual		DEVIATION DURATION		DESCRIPTION AND			MALFUNCTION? (Yes or No - If Yes, continue to the next column)	(If no reports were made, state ANO REPORTS@ in the space below)	(If r we sta REF
					DATE/TIME START	DATE/TIM E END	MAGNITUDE OF THE DEVIATION			the next column	space below)	the sp
der	A.III.1- Perform weekly checks, when the emissions unit is in operation and when the weather conditions allow, for any visible particulate emissions from the stack serving this emissions unit.		×	Records of weekly VE checks	01/01/13	01/27/13	A total of 4 weekly VE checks were not performed.	Facility personnel change over and inadequate Title V training processes.	A Title V compliance plan and training program are currently being implemented across all process operations	No	No	

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FACILITY NAME: BASE Corp.			
FACILITY ID (PREMISE NUME	3ER): 02-47-04-0195		
FACILITY ADDRESS: 120 Pir	ne Street, Elyria, OH 44035		
Issuance or most recent modifi	cation date: 07/27/01		
QUARTERLY Reporting Perio	d	SEMIANNUAL Reporting Perio	od
From: NA	To: NA	From: 01/01/13	To: 06/30/13
Reporting deadline: 07/31/201	3		

NS J) otion w)	TITLE V PERMIT TERM NO & Description	TERM Reporting Requirement (choose one) or both		ACTUAL METHOD USED TO DETERMINE COMPLIANCE		DEVIATION INFORMATIO		PROBABLE CORRECTIVE CAUSE FOR ACTIONS / THE PREVENTATIVE DEVIATION MEASURES TAKEN	ACTIONS / DEVIATION V PREVENTATIVE ATTRIBUTABLE REI MEASURES TAKEN TO A D		MALI W RE. D	
		Quarterly	Semi- Annual			ATION ATION	DESCRIPTION AND MAGNITUDE			MALFUNCTION? (Yes or No - If Yes, continue to the next column)	(If no reports were made, state ANO REPORTS@ in the	(If r we sta REF
					DATE/TIME START	DATE/TIM E END	OF THE DEVIATION			the next column	space below)	the sp
) der	B.III.1.b- Collect and record the scrubber water flow rate, in gallons per minute, once each day.		×	Records of scrubber water flow rate	01/10/13	01/10/13	A total of 1 daily scrubber water flow rate records are missing.	Facility personnel change over and inadequate Title V training processes.	A Title V compliance plan and training program are currently being implemented across all process operations	No	No	

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FACILITY NAME: BASF Corp.			
FACILITY ID (PREMISE NUMBER): 02	2-47-04-0195		
FACILITY ADDRESS: 120 Pine Street	, Elyria, OH 44035		
Issuance or most recent modification d	ate: 07/27/01		
QUARTERLY Reporting Period		SEMIANNUAL Reporting Period	
From: NA	To: NA	From: 01/01/13	To: 06/30/13
Reporting deadline: 07/31/2013			

NS J) otion w)	TITLE V PERMIT TERM NO & Description	(choos	Requirement se one) poth	ACTUAL METHOD USED TO DETERMINE COMPLIANCE		DEVIATION INFORMATION		PROBABLE CAUSE FOR THE DEVIATION	CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A MALFUNCTION?	MALFUNCTION VERBAL REPORT(S) DATE(S) (If no reports were	MALI W RE. D (If r
		Quarterly	Semi- Annual		DEVIA DURA	ATION ATION	DESCRIPTION AND MAGNITUDE			(Yes or No - If Yes, continue to the next column)	made, state ANO REPORTS@ in the space below)	we sta REF
					DATE/TIME START	DATE/TIM E END	OF THE DEVIATION			the next column	space below)	the s
) der	B.III.2-Record the pressure drop across the baghouse on a daily basis.		×	Records of daily pressure drop readings for the baghouse	01/10/13	01/10/13	A total of 1 daily ΔP records are missing.	Facility personnel change over and inadequate Title V training processes.	A Title V compliance plan and training program are currently being implemented across all process operations.	No	No	

FACILITY NAME: BASF Corp.			
FACILITY ID (PREMISE NUMBER): 02	2-47-04-0195		
FACILITY ADDRESS: 120 Pine Street	, Elyria, OH 44035		
Issuance or most recent modification d	ate: 07/27/01		
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NS J) otion w)	TITLE V PERMIT TERM NO & Description	(choos	Requirement se one) ooth	ACTUAL METHOD USED TO DETERMINE COMPLIANCE		DEVIATION INFORMATION		PROBABLE CAUSE FOR THE DEVIATION	CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A	MALFUNCTION VERBAL REPORT(S) DATE(S)	MALI W RE. D
		Quarterly	Semi- Annual		DEVIA DURA		DESCRIPTION AND MAGNITUDE			MALFUNCTION? (Yes or No - If Yes, continue to the next column)	(If no reports were made, state ANO REPORTS@ in the	(If r we sta REF
					DATE/TIME START	DATE/TIM E END	OF THE DEVIATION			the next column)	space below)	the sp
) Kiln	A.III.1- Perform weekly checks, when the emissions unit is in operation and when the weather conditions allow, for any visible particulate emissions from the stack serving this emissions unit.		×	Records of weekly VE checks	01/01/13	01/27/13	A total of 4 weekly VE checks were not performed.	Facility personnel change over and inadequate Title V training processes.	A Title V compliance plan and training program are currently being implemented across all process operations.	No	No	

FACILITY NAME: BASF Corp.			
FACILITY ID (PREMISE NUMBER):	02-47-04-0195		
FACILITY ADDRESS: 120 Pine Stre	et, Elyria, OH 44035		
Issuance or most recent modification	date: 07/27/01		
QUARTERLY Reporting Period		SEMIANNUAL Reporting Perio	od
From: NA	To: NA	From: 01/01/13	To: 06/30/13
Reporting deadline: 07/31/2013			

NS J) otion w)	TITLE V PERMIT TERM NO & Description	(choos	Requirement se one) poth	ACTUAL METHOD USED TO DETERMINE COMPLIANCE		DEVIATION INFORMATION		PROBABLE CAUSE FOR THE DEVIATION	CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A MALFUNCTION?	MALFUNCTION VERBAL REPORT(S) DATE(S) (If no reports were	MALI W RE: D (If r
		Quarterly	Semi- Annual		DEVIA DURA		DESCRIPTION AND MAGNITUDE			(Yes or No - If Yes, continue to the next column)	made, state ANO REPORTS@ in the space below)	we sta REF
					DATE/TIME START	DATE/TIM E END	OF THE DEVIATION			the next columny	space below)	the s
Kiln	A.III.1- Perform weekly checks, when the emissions unit is in operation and when the weather conditions allow, for any visible particulate emissions from the stack serving this emissions unit.		x	Records of weekly VE checks	01/01/13	01/27/13	A total of 4 weekly VE checks were not performed.	Facility personnel change over and inadequate Title V training processes.	A Title V compliance plan and training program are currently being implemented across all process operations.	No	No	

FACILITY NAME: BASF Corp.			
FACILITY ID (PREMISE NUMBE	R): 02-47-04-0195		
FACILITY ADDRESS: 120 Pine	Street, Elyria, OH 44035		
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QUARTERLY Reporting Period		SEMIANNUAL Reporting Perio	od
From: NA	To: NA	From: 01/01/13	To: 06/30/13
Reporting deadline: 07/31/2013			

NS J) otion w)	TITLE V PERMIT TERM NO & Description	(choos	Requirement se one) ooth	ACTUAL METHOD USED TO DETERMINE COMPLIANCE		DEVIATION INFORMATION		PROBABLE CAUSE FOR THE DEVIATION	CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A	MALFUNCTION VERBAL REPORT(S) DATE(S)	MALI W RE. D
		Quarterly	Semi- Annual		DEVIA DURA		DESCRIPTION AND MAGNITUDE			MALFUNCTION? (Yes or No - If Yes, continue to the next column)	(If no reports were made, state ANO REPORTS@ in the	(If r we sta REF
					DATE/TIME START	DATE/TIM E END	OF THE DEVIATION			the next column)	space below)	the sp
: RY ER	A.III.2- Perform daily checks, when the emissions unit is in operation and when the weather conditions allow, for any visible particulate emissions from the stack serving this emissions unit.		×	Records of daily VE checks	04/22/13	05/02/13	A total of 10 daily VE checks were not performed during the reporting period.	Facility personnel change over and inadequate Title V training processes.	A Title V compliance plan and training program are currently being implemented across all process operations.	No	No	

FACILITY NAME: BASF Corp.			
FACILITY ID (PREMISE NUMBER): 02	2-47-04-0195		
FACILITY ADDRESS: 120 Pine Street	, Elyria, OH 44035		
Issuance or most recent modification d	ate: 07/27/01		
QUARTERLY Reporting Period		SEMIANNUAL Reporting Period	
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Reporting deadline: 07/31/2013			

NS J) otion w)	TITLE V PERMIT TERM NO & Description	(choos	Requirement se one) poth	ACTUAL METHOD USED TO DETERMINE COMPLIANCE		DEVIATION INFORMATION		PROBABLE CAUSE FOR THE DEVIATION	CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A	MALFUNCTION VERBAL REPORT(S) DATE(S)	MALI W RE. D
		Quarterly	Semi- Annual		DEVIA DURA		DESCRIPTION AND			MALFUNCTION? (Yes or No - If Yes, continue to the next column)	(If no reports were made, state ANO REPORTS@ in the	(If r we sta REF
					DATE/TIME START	DATE/TIM E END	MAGNITUDE OF THE DEVIATION			іне нехі соштп)	space below)	the s
? RY ER	A.III.2- Perform daily checks, when the emissions unit is in operation and when the weather conditions allow, for any visible particulate emissions from the stack serving this emissions unit.		×	Records of daily VE checks	06/05/13	06/05/13	A total of 1 daily VE checks were not performed during the reporting period.	Facility personnel change over and inadequate Title V training processes.	A Title V compliance plan and training program are currently being implemented across all process operations.	No	No	

Ohio Environmental Protection Agency Section III- Page 2

**Deviation Reporting** 

FACILITY NAME: BASF Corp.			
FACILITY ID (PREMISE NUMBER): 02	2-47-04-0195		
FACILITY ADDRESS: 120 Pine Street	, Elyria, OH 44035		
Issuance or most recent modification d	ate: 07/27/01		
QUARTERLY Reporting Period		SEMIANNUAL Reporting Period	
From: NA	To: NA	From: 01/01/13	To: 06/30/13
Reporting deadline: 07/31/2013			

NS J) otion	TITLE V PERMIT TERM NO & Description	TERM Reporting Requirement USED TO		DETERMINE		DEVIATION INFORMATION			CORRECTIVE ACTIONS / PREVENTATIVE	WAS THIS DEVIATION ATTRIBUTABLE TO A	MALFUNCTION VERBAL REPORT(S) DATE(S)	MALI W RE.
·w)		Quarterly	Semi- Annual	COMPLIANCE	DEVIA DURA		DESCRIPTION AND	DEVIATION	MEASURES TAKEN	MALFUNCTION ? (Yes or No - If Yes, continue to	(If no reports were made, state ANO REPORTS@ in the	(If r we sta REF
					DATE/TIME START	DATE/TIM E END	MAGNITUDE OF THE DEVIATION			the next column)	space below)	the s
RY ER	A.III.2- Perform daily checks, when the emissions unit is in operation and when the weather conditions allow, for any visible particulate emissions from the stack serving this emissions unit.		×	Records of daily VE checks	01/14/13	06/05/13	A total of 6 daily VE checks were not performed during the reporting period.	Facility personnel change over and inadequate Title V training processes.	A Title V compliance plan and training program are currently being implemented across all process	No	No	

See page 3 of the instructions ASECTION III ADDITIONAL DETAILED INSTRUCTIONS FOR COMPLETING A DEVIATION REPORTING TABLE of for guidance on this table.

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